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# 15765 The Bulletin

## OF THE ALUMNI OF RUSH MEDICAL COLLEGE

Volume III

AUGUST, 1906

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B. M. LINNELL, Editor

100 State Street, CHICAGO, ILL.

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## ADDRESS OF THE PRESIDENT OF THE ALUMNI ASSOCIATION OF RUSH MEDICAL COLLEGE.

J. W. PETTITT, '84, Ottawa, Ill.

To every generation, indeed to every decade, are presented new problems. Not infrequently the changes necessary to meet the demands are so radical as to almost amount to a revolution. These statements apply with peculiar force in these latter days to the study and preparation for the practice of medicine. The thoughtful, progressive men who have so successfully shaped the policy and controlled the affairs of our Alma Mater, have made such radical changes and rapid progress during the past few years that it has been almost impossible for those of us who have not been in close touch with their work to keep pace with them.

The old Rush of ten, twenty, thirty, forty, years ago exists no more, except in the pleasant memories of those who were students in those days. This would be a cause for regret were it not for the fact that the new Rush is a glorious fulfillment of the day-dreams and ideals of the devoted and far-seeing men who have shaped her destinies in the years that are past. The policy of our Alma Mater has always been to keep in the forefront in medical education. The changes recently made in her affiliation with a great University may seem too radical to the superficial observer who lives in the traditions of the past, rather than in the hopes of the future; therefore it will be profitable to analyze the conditions which exist in the field of medical endeavor for the purpose of getting a better perspective.

As society grows older, intellectual culture more acute, competition more active, a higher state of knowledge is demanded from those who seek the honors and emoluments of professional life. These advances are the natural outgrowth of a more active, refined, and intellectual civilization. In keeping with the progressive spirit of the age the standard of requirements for a medical education have necessarily been raised until it is no longer possible for the proprietary college to meet the demands. Under the old regime, practitioners were also teachers. This system met the demands of the past, but to meet those of the present and the future the teachers of the fundamental sciences must devote their whole time to only one elementary science. To teach medicine a generation ago was the recreation of the practitioner. To-day it is a formidable task. Within a generation the science of medicine has been born and the art and practice been recreated. The proprietary school is henceforth impossible. The spirit of University life and culture will hereafter dominate and have a powerful influence in medical training.

Co-ordinate with and in consequence of the tremendous development of the sciences during the past century medicine has become rational, adopting scientific methods and appropriating the knowledge accumulated by the pioneers in medical science. Medicine has thrown off the shackles of empiricism. It has arisen from the domain of an empirical art to a fixed position among the applied sciences. The medical profession as a whole does not fully realize that this changed condition is the result of exact fundamental knowledge, which can only be secured in our great universities under teachers who are recognized masters in their respective branches.

With an equipment at their command, which is absolutely impossible in the proprietary college, few even of the more progressive physicians realize how inadequate would be the methods by which they were educated, and the standards which obtained in their student days to meet the demands of the present time. Medicine approaches an exact science in proportion to the thoroughness with which the fundamental branches are taught and understood. Hitherto these have been taught by practicing physicians who have not made thorough preparation for teaching these subjects, nor who have any intention of giving their energies exclusively to them. Under the university plan these fundamental branches are placed in the hands of teachers who are professional chemists, anatomists, physiologists, bacteriologists, etc., etc. They are teachers of science rather than medicine. This is the distinguishing feature between the proprietary and the University plan of instruction. The sciences which lie at the foundation of clinical medicine have expanded enormously in the last twenty-five years, and it is during that period that medical study and practice have made more progress in the direction of scientific exactness than in all the previous centuries. The practice of medicine is an applied science, and consists in the application of the principles, facts, and methods of physics, chemistry, anatomy, physiology, bacteriology, pharmacology, and pathology, to the study and treatment of the diseases and accidents of the living body. In the pursuit of an applied science the only logical method of procedure is to master first the fundamental facts and principles of these sciences; then and then only can one intellectually comprehend their application to the specific problems of medicine fundamentally. The chem-



istry which the physician must know is the same as that required by the metallurgist, the analytical chemist, the pharmacist, or one in any vocation into which chemistry enters. It is only in the application of chemistry along these special lines that the methods differ. If the physician is to have a ground work in chemistry which will enable him to keep abreast with the advancement in his profession, he must so master the general subject that he will be able to keep in touch with the progress in chemistry, to read its literature intelligently, and apply its frequent new discoveries in his daily work. These statements apply with equal truth to all the fundamental branches.

It is upon fundamental principles that the great superstructure of medical practice rests. Physicians engaged in active practice must be depended upon to improve the *art* of medicine, but the discovery and elaboration of the great principles underlying the practice must be left in the future, as they have in the past, to the specialist who makes a particular science his life work. Pasteur, the scientist, who knew little or nothing about medicine, revolutionized medicine and surgery by a discovery which at the time seemed to have no bearing whatever upon medical science. Koch's discovery of the tubercle bacilli was made in his capacity as a scientist and not as a physician.

At present medicine is divided into two broad departments. We must make a distinction between the art and the science. The science of medicine includes physics, anatomy, pathology, bacteriology, and hygiene. These seek definitely to determine the cause and course of disease, and to know the exact mechanism of the reaction of the organism to remedial agents. These are what we call the fundamental branches and their teaching must of necessity be left to the specialists, who may or may not be medical men, but in no event are they practitioners. To them must we look for original work in their respective fields of endeavor. The art of medicine, on the other hand, is concerned with the application of this co-ordinated knowledge to the study, prevention, and alleviation of diseases. This department should, with equal propriety, be left to the practitioner to whom we must look for the development of the *art* of medicine.

But why, at this late day, enter into an argument in defense of the university plan of education? The reasons are too apparent to need any defense or require an extended explanation. The practical results thus far obtained as contrasted with the old methods of teaching are a sufficient vindication, if any are needed. Indeed, the present graduating class is a most practical illustration of the difference between the old and the new methods of instruction.

I assume, and I think very reasonably, that the native talent of the recent graduating class was neither of a higher or lower order than the classes who have preceded them, but look at the difference in the results as measured by the only standard which presents itself—that of examinations for hospital positions. Out of twenty hospital positions open to competitive examinations, the graduating class of 1906 of Rush captured fourteen places, with only twenty competitors from the class. The hospital internship positions now open to Rush graduates are so numerous that practically every graduate can secure such service positions if he so desires. This is a record unparalleled in this or any other city in this other country. The real test of

scholarship is what men can do. Measured by this standard the class just graduated have been weighed and not found wanting.

Aside from the immediate advantages which the attainment of such positions give, think of the greater advantages which accrue in the way of confidence, inspiration, and the joy of achievement which comes to every one who feels that he is fully equipped for his life work. How many of us who entered upon the study of medicine in the years that have passed found to our sorrow and disappointment when we entered practice that we were not fully equipped to meet its duties and responsibilities. It is perhaps not too strong a statement to make that many if not a majority of the medical men who have distinguished themselves in the past have been compelled to overcome the defects of their early education in order to achieve distinction in their profession. Think of the waste of time and energy which such a plan involves; consider also that larger number who did not have the courage, ability, or opportunity to make amends for the short-comings of their college education. Think of the army of mediocre medical men which the old system produced, to say nothing of that large number who, realizing the imperfections of their medical knowledge, lacked the power to discriminate between a faulty method of education, and what they believed were the imperfections of scientific knowledge, and as a result either abandoned the practice of medicine, or degenerated into quackery.

I do not wish to be understood as condemning the medical teaching of the past. It was, perhaps, as good as could be given under the circumstances. My object in pointing out its imperfections is to more clearly emphasize the necessity for the new departure which our Alma Mater has made.

There is no disguising the fact that some of our members who do not fully comprehend the situation are under the impression that Rush either has or will, by the changes recently made, lose her identity. This has had a tendency to estrange some of our members and it is the purpose of this address to clear up any possible misunderstandings and misconceptions by presenting some facts for your consideration.

At our last annual meeting Dr. Billings made the startling statement that the recent changes in the policy of the College had so reduced the revenues that it was necessary for the members of the faculty to contribute their salaries in order to meet current expenses. This was a revelation to those who heard the statement, and when notified of my election as president it occurred to me that some action should be taken to rally the graduates of Rush to the support of the faculty in carrying our College through this crisis. With this end in view a visiting committee was appointed representing several of the leading Northwestern states and after a conference with a committee representing the faculty, at their suggestion, visited the several departments in which medical instruction is given, with a view to ascertaining the facts and presenting them to them members of this Association.

The committee was warmly welcomed by the faculty and given every opportunity desired for a careful inspection of the new methods of college work, the present relations with the University of Chicago fully explained, and its future plans and prospects outlined. I quote freely from the report of your committee and what I have to say is in effect an enlargement of that report.



The affiliation of Rush with the University of Chicago was conceived and entered into by the faculty in the belief that such an arrangement would insure more certainly than any other the permanent high standing and continued advancement of the college. The motives which impelled them to make these changes were prompted by a high sense of duty. After years of toil and self-denial on their part Rush enjoyed the distinction of having the largest number of students of any American school, and the large income from fees was sufficient to provide for very satisfactory instruction along then existing lines. Notwithstanding these facts the faculty saw that medical education of the future was to be along university lines. The University of Chicago had announced its intention of instituting a medical department and with its high ideals, comprehensive plans, and large resources, this was certain to occupy a commanding position among the medical institutions of the world. Actuated by a desire to insure for Rush College a permanent position among medical schools, the members of the faculty and board of trustees paid in full its bonded debt of \$71,000 and gave it absolutely into the hands of a board of trustees selected by the University, and agreed that this institution should control its educational policy. This arrangement was made with absolute freedom from any conditions or pledges, expressed or implied, as to the interest of the old faculty, that there might be no hindrance to the selection of the strongest possible instructional force and the development of the college as rapidly as might be along University lines. The offer was accepted upon these conditions, which severely tested the courage of the faculty, and their compliance with the demands made upon them was the most remarkable exhibition of devotion to advanced medical education of which we have any record, and this in itself should be a sufficient guarantee of the integrity of the motives of the faculty and their high sense of duty in keeping our Alma Mater where she has always been, in the front rank of medical colleges in the United States.

The arrangement still continues as one of affiliation only. The management is vested in a board of trustees separate from the University board, but its relation in an educational way is more intimate than that which exists in any American college and the University of which it is a part. It must be understood that notwithstanding the enormous resources of the University which are prospectively at the command of its board of trustees, these are not available at present, therefore during the time intervening between the present affiliation and the complete amalgamation contemplated in the future, the college has no means of support excepting the fees from students. In view of the fact that the improved methods of instruction are much more expensive than formerly; the advanced preliminary requirements for admission; and that the fees for the first two years are paid to the University, the problem of meeting current expenses becomes serious. For the present the expenses of the medical department must be met by fees from students, the deficiency being made good from other than University sources. The complete amalgamation of the College with the University will be brought about in due time and as rapidly as the circumstances surrounding so large an undertaking will permit. When this occurs the vast amount of money needed to develop and maintain the medical department according to the plans outlined will not depend upon the contingency of students' fees. These, then, are the condi-

tions which makes our assistance necessary and desirable. The faculty do not ask us for financial aid, but they do need and should have our moral support and assistance in securing the best class of well-equipped medical students. It is not students Rush needs, but those who can meet the entrance requirements and satisfactorily pursue the advanced curriculum. It ought to be easily possible for our Alma Mater to secure a large proportion of the young men throughout the country, and particularly the Northwest, who are well equipped and have high ideals. A systematic and well directed effort is all that is needed to accomplish this result. By way of suggestion I would recommend that a standing committee be appointed whose duty it shall be to devise ways and means for bringing about this result. By such a course we will advance the cause of legitimate medicine, insure the professional success of the young men whom we enroll as students, assist our faculty in carrying the great burdens which they have assumed, and honor our Alma Mater, to whose interest we should always be devoted.

In addition to the great advantages which accrue to the University student in the study of the fundamentals of medicine, which is perhaps its most distinguishing feature, the student also lives in a university atmosphere and has an opportunity to associate with men who are cultured, and already this influence is noticeable in the students who are pursuing their medical course in our Alma Mater. In the clinical schools on the West Side the curriculum is enormously increased. The students there have an opportunity to take laboratory diagnosis, courses in blood, sputum, feces, stomach contents, urine, and other materials, to make culture from throats, the blood, secretions, abscesses, etc., etc., and to familiarize themselves with all the instruments of precision in laborator diagnosis. The clinical facilities are enormously increased over that of a few years ago. There is a surgical clinic every day in the week the year round, and on some days more than one. More than thirty thousand patients annually visit the out-patient department, and the dispensary is now in such good working order that students have an opportunity such as they never had before in coming in direct contact with patients. The Presbyterian Hospital facilities are better than ever and in the near future a new pavilion will be erected which will increase the clinical material by fifty per cent.

In addition to these advantages Rush has a library which ranks fifth or sixth in number of volumes and pamphlets in the United States. From fifty to one hundred students may be found every day consulting the library, and this number is an index of the earnestness of the student body. Those of the alumni who desire can now secure post-graduate work with clinics running every day in medicine, surgery and gynecology. This free of cost, in addition to which they may have a course in laboratory diagnosis for a small fee, which is only intended to cover the cost for materials and the instruments used. Never before has Rush been in position to teach medicine as efficiently as now and its alumni may well be proud of their Alma Mater. It is now possible for a student to enjoy facilities for securing a medical education at Rush, second only to one in the United States, and when the present plans are carried out the advantages presented will be second to none in the world. These contemplate in part the erection of numerous buildings which will be used for original research. One of the principal features of

which will be the establishment of hospitals in which patients will be grouped and classified with reference to special diseases, as, for example, typhoid fever, pneumonia, etc., with a view to elaborating and perfecting better methods of treatment. The plans are so elaborate and comprehensive as to almost be beyond belief. This briefly is an outline of what has been done in the recent past, and what is in contemplation for the future.

There never was a time in the history of the world, probably, when medicine gave as much promise to the student of a successful career as now. But he who takes it up as a life vocation, who is poorly prepared and improperly educated will meet defeat in competition with his colleague who is thoroughly educated.

The status of medicine to-day is such that he who would meet success must have a good preliminary education; the discipline of mind and broad culture which can only be secured by a university education. The poorly prepared student has no conception of medicine as a science; no pleasure in the investigation of the many problems which confront the physician; only a half knowledge of the responsibilities of his calling. He can have no pleasure in scientific discussions and in the fellowship with the best men of the profession. He who is poorly prepared and improperly educated will meet defeat in competition with a man who is thoroughly equipped and is a physician because he wishes to benefit mankind. There can be no competition except between men of like educational advantages and the opportunities which education brings.

In the affiliation of Rush with the University of Chicago the faculty have not made a mistake, but have grasped a great opportunity which will place the college on a sure and permanent foundation. Our faculty has "Stepped into the tide at its flood which is to carry her on to greater usefulness." Our faculty have acted wisely and well. They deserve the enthusiastic support of every loyal alumnus in the magnificent and comprehensive work which they have undertaken and thus far accomplished.

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## THE ANNUAL BUSINESS MEETING

The Annual Business Meeting of the Alumni Association of the Rush Medical College was called to order at 6 P. M., June 13, 1906, at the City Club, Chicago, with the president, Dr. Pettit, in the chair. The minutes of the last meeting were read and approved. The roll call was dispensed with on account of the Register being kept. There were present 110 members of the Alumni Association.

The secretary's report was then read as follows:

### REPORT OF SECRETARY.

During your secretary's absence last year the work of the secretary was carried on by Dr. George H. Weaver up to October 1, 1905. He kept a record of the minutes of last meeting and published two BULLETINS—one in June and one in August. On October 1st the work was turned over to your regular secretary. The membership reported last year was 671. This refers clinic—especially attractive—might be prepared for the visiting Alumni. to those who have paid dues from January 1, 1905, to June 13, 1905. Reckoning on the same basis—namely, those who have paid dues from January 1,



1905, to June 11, 1906, number 681. Those who have actually paid from June 1, 1905, to June 1, 1906, number only 258. This is an increase of the number of two years reported by me, which was 216—shows a slight increase, but the increase is not as great as the number added to our Alumni by graduation. The Association should number 1,000 members. We have 4,500 Alumni whose addresses are known. We ought to get at least one in four for our Association.

The BULLETIN has appeared four times during the year, and contained the same features of the year before. In addition, we have added abstracts of the letters of the Alumni sent Prof. Haines. We began with the letters of the oldest graduates and took them by classes in order. We have published through the class of '76. If this work is to be continued, the BULLETIN should be made larger. At the rate we are going now it will take us several years to complete the list. There have been received from the Alumni about 900 letters. This work will be pushed until all have been heard from. It was suggested last year that the BULLETIN be enlarged, but your secretary has not felt that he was justified in undertaking the expense of a larger BULLETIN with the present membership. That ought to be considered by this Association. Owing to the amount of work necessary to make the BULLETIN attractive, I feel as if a publication committee of the Association ought to be appointed to assist in this work.

As last year, the executive committee has been interested in following up the state meetings. Reunions of the Alumni of Rush Medical College have been held this year in several states. This feature of our work is growing at such a rate that I feel as though some step should be taken to make them a permanent auxiliary to the general Alumni Association. I would suggest that the executive committee be instructed to take this matter up in connection with a revision of our constitution. We can get the College in touch with Alumni who are unable to come to the annual meetings.

REVISION OF THE CONSTITUTION.—Our constitution needs revising. On account of the wording of the constitution we were unable to obtain second-class rates through the postoffice department for the BULLETIN. I would recommend that the executive committee be instructed to revise the constitution, having in mind an organization which might in some way include the state societies.

Steps toward facilitating the sending out of reprints by the Alumni have been taken by preparing a book with the corrected list of the Alumni and addresses up to date. This book is kept at the College, but it is owned by the Alumni Association and arrangements can be made so that reprints can be sent out through the use of it. For particulars, apply either to the College or to the secretary.

We have corrected the mailing list as far as possible to date, but there are always errors which will creep in and great effort is being made to keep this list accurate by paying strict attention to letters received from the Alumni and misdirected BULLETINS. I would suggest that a committee be appointed to aid in the preparation for Commencement exercises—the class of '06 have been of great help in this respect and have prepared most of the exercises announced for this year. But there is need for an Alumni committee to help. Dr. Billings has suggested that next year two weeks of

This I consider a good suggestion, and recommend that the Association appoint a committee to assist in the arrangements for the next Commencement.

I wish to thank the Alumni who have given so much assistance in arranging for this meeting.

I wish also to thank Dr. Weaver, the members of the graduating class, and the members of the Faculty who have so generously aided in the plans for Commencement week.

Respectfully submitted,

B. M. LINNELL, '93, Sec.

Moved by Dr. Dodson, seconded and carried, that a committee be appointed to consider the recommendations as outlined in the secretary's report and report later in the evening. The committee was appointed as follows: Drs. Dodson, '86; Chamberlain, '82; Walker, '89.

The treasurer's report was then read as follows:

# REPORT OF THE TREASURER.

## Receipts—

Balance on hand June 15, 1905.....	\$579.60	
Dues from members and contributions to Fellowship Fund .....	345.75	
From R. M. C. on BULLETIN.....	63.50	
		<u>\$988.85</u>

## Expenditures—

BULLETIN .....	\$425.02	
Fellow .....	400.00	
Miscellaneous .....	53.69	
		<u>\$878.71</u>

Total Balance.....		<u>\$110.14</u>
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## Bills Payable—

Dr. Wolf's Reprint.....	\$ 25.00
Record Book.....	.70

## Amount Receivable—

From College.....	\$120.00	<u>\$ 94.40</u>
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Final Balance.....		<u>\$204.54</u>
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B. M. LINNELL, '93, Treas.

Drs. Ingalls, '71, Craig, '78, and Freer, '68, were appointed as auditing committee.

The Necrologist's report was then read by Dr. C. J. Whalen, '91. Moved by Dr. Rhodes and seconded that this report be received and published in the BULLETIN and permanently recorded. Carried.

The Nominating Committee was then appointed and consisted of the following men:

NOMINATING COMMITTEE.—Beasley, '64; Woodworth, '70; Adolphus, '72; McCleery, '75; Meyer, '76; Plecker, '77; Wm. J. Mead, '80; Pettyjohn, '82; Bevan, '83; Head, '84; Freer, '86; DeBey, '89; Corwin, '90; Parker, '91; Slaymaker, '92; Bailey, '93; Ochsner, '94; Hollenbeck, '95; Kenyon, '96; Clayton, '97; Ware, '98; Gallagher, '99; Ide, '00; Vaughn, '01; Rosenow, '02; Swift, '04.

Dr. Weaver, chairman of the Fellowship Committee, then made his report. Moved that it be accepted. Carried.

Moved by Dr. Bevan that the committee be instructed to return to its former methods for making collections for the Fellowship Fund, namely, the Fellowship Fund should be collected and accounts kept by the Fellowship Committee, and this should be separated from the report and account of the secretary and treasurer.

Dr. Dodson's report on the secretary's recommendation was then read. The report was as follows:

1. *Resolved*, That a vote of hearty thanks be extended to Dr. Linnell, secretary, and to Dr. Weaver for their very very efficient work during the year.

2. *Resolved*, That the BULLETIN of the Association should be doubled in size in order that we may more speedily present the members of the Association the full histories of the members contained in the responses to the circular letters sent out and which are now in the hands of the special committee, of which Prof. Haines is the chairman.

3. *Resolved*, That the Executive Committee be instructed to revise the constitution, such revision to include provision for:

a. *Such* changes as will make it possible to mail the BULLETIN as second-class matter.

b. The appointment by the president of a standing committee of three members on publication to assist the secretary in preparing the BULLETIN.

c. The appointment by the president of a standing committee of three members on Membership and State Associations, whose duties shall comprise means to increase the membership of the general Association, the appointment of sub-committees from members of the several state organizations and the general encouragement of Alumni meetings in the several states.

4. Your committee is of the opinion that the Executive Committee should have charge of the arrangements for the annual meeting, co-operating with a committee from the graduating class as heretofore.

It was moved and seconded that the report should be accepted and the recommendation be adopted. Carried.

It was moved by Dr. Dodson that a standing Committee on Membership and Alumni Relations to the College be appointed. Seconded and carried.

The Association then adjourned to the dining room. During dinner the report of the Nominating Committee was received, as follows

President—Dr. J. W. Pettit, '84, Ottawa, Ill.

First vice-president—G. P. Head, '84, Chicago.

second vice-president—O. S. Ormsby, '95, Chicago.

Third vice-president—G. C. Clark, '81, Stillwater, Minn.

Necrologist—A. L. Craig, '78, Chicago.

Secretary and treasurer, B. M. Linnell, '93, Chicago.

It was moved and seconded that the report of the Nominating Committee be accepted and the secretary be instructed to cast the ballot for the officers as reported by the Nominating Committee. Carried.

Dr. J. W. Pettit withdrew and resigned as president and suggested that he precedent ought not to be established of electing the same Alumnus as presi-



dent two years in succession. He suggested the name of Dr. A. T. Holbrook, Milwaukee, Wis. This was unanimously adopted by the Association, and Dr. Holbrook was elected president.

After dinner the Association adjourned to the library and reading room of the club. Dr. Woolf, the Alumni Fellow, for the last year, then read his paper, which was a partial report of his work done under the Fellowship Fund for the last year.

Dr. L. Hektoen, '89, in discussing Dr. Wolf's paper, spoke of its high value, and the value of the work done by the Fellowship Committee, and recommended that an effort be made to raise a permanent fund of \$25,000 for the establishment of a Permanent Alumni Fellowship. He offered to be one of 250 to raise this fund.

Dr. Rosenow, '02, former Fellow of the Alumni Association, then discussed Dr. Wolf's paper. A vote of thanks was then extended to Dr. Wolf for his excellent work under the Fellowship Fund.

Drs. Pettit and Dodson also discussed Dr. Wolf's paper and the offer of Dr. Hektoen.

Dr. J. W. Pettit, '84, then read his address, which is published as the first article in this BULLETIN.

It was moved by Dr. Favill that the address of the president be received and published. Seconded and carried.

Speeches were then made by the following men:

Dr. Whitelaw, '06, for the graduating class.

Dr. Billings, president of the Faculty, Rush Medical College, stated that he would like to see a permanent Fellowship Fund established and suggested that the Fund be established in the name of our past great men of Rush Faculty, as Gunn, Allen or Parkes. He also stated that he would meet the offer of any three in a subscription to this fund.

Dr. Favill and other spoke on the general topic of the Alumni Association.

A great deal of enjoyment during the evening was derived from music furnished by the Class of '02. The members of this quartette sang together during their college days and have sang for us frequently during these meetings with great credit to themselves and pleasure to the Association.

The meeting then adjourned.

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#### LIST OF RUSH MEDICAL COLLEGE ALUMNI WHO HAVE DIED SINCE LAST ANNUAL MEETING.

COURTNEY L. SMITH, M. D., 1879, died at his home in Aurora, Ill., from labioglossopharyngeal paralysis, April 15, after an illness of several months, aged 47.

HENRY WAGNER KREIDER, 1856, aged 86, May 25th, from senile debility, at his home in Galesburg, Ill.

JOHN FORD McCARTHY, 1855, aged 77, May 27th, from cancer, at his home in Valparaiso, Ind. During the civil war he served as surgeon in the Fifteenth and the Twenty-ninth Indiana Volunteer Infantry, and as postmaster of Valparaiso for twelve years.

Joseph N. Black, M. D., 1883, a member of the Adams County Medical Society, died at his home in Clayton, Ill., June 8th, from an overdose of morphine, aged 45.

UBERT LEE HOLFORD, M. D., 1892, for seven years a member of the village board of Cassville, Wis., and for the last two years its president, died at his home in Cassville from tuberculosis, June 13, after an illness of a year, aged 33.

W. C. JOHNSON, M. D., 1869, of Springfield, died at the St. John's Hospital, June 13th, of obstruction of the bowels, caused by an enterolith, aged 66 years. Dr. Johnson had resided in Springfield for seven years, having resided and practiced at Pawnee since his graduation.

EUGENE B. PERRY, M. D., 1880, died at his home in Melvin, Ill., June 22d, from uremia, after a short illness, aged 61.

WILLIAM COMERFORD, M. D., 1890, died at his father's house in Appleton, Wis., June 27th, after ten years of ill health, from hemorrhage of the stomach.

JAMES A. McKINNEY, M. D., 1895, died at his home in Grand Valley, Colo., July 7, from heart disease with complications, aged 35.

ABRAHAM MILLER, M. D., 1868, a retired practitioner of Bloomington, Ind., died at his home in that city, July 11, from cerebral hemorrhage, after a short illness, aged 71.

WILLIAM O'N. MENDENHALL, M. D., 1870, sometime president of the Illinois State Medical Society, died at his home in Richmond, Ind., July 17, after a long illness, aged 71.

ALEXANDER P. NELSON, M. D., 1864, assistant surgeon of the Eighty-fourth Illinois Volunteer Infantry during the civil war, died at his home in Kirkwood, Ill., July 19, from cerebral hemorrhage, after an illness of one day, aged 77.

DAVID T. KYNER, M. D., 1856, died at his home in Blue Mound, Ill., July 23, after a long illness, aged 72.

ORVILLE A. HARDING, M. D., was drowned while hunting, in the Flambeau River, near Ladysmith, Wis., August 11, aged 35.

J. FRANKLIN FORD, M. D., 1887, sometime president of the Fox River Valley Medical Society and president of the village board, died at his home in Omro, Wis., from diabetes, August 28, after a prolonged illness, aged 50.

LUTHER E. STOMWELL, M. D., 1900, of Williamsfield, Ill., a member of the Knox County Medical Society, died in Peoria, August 26, after a long illness, aged 30.

CHARLES F. DILLEY, M. D., 1863, died at his home in Spickard, Mo., September 3, aged about 75.

DENNIS LINCOLN RUSSEL, M. D., 1872, assistant surgeon during the civil war, died at his home in Rushville, Ill., September 5, after a long illness from dropsy, aged 70.

JAMES C. LOVEJOY, M. D., 1848, a pioneer settler of Greene County, Iowa, died at his home in Rippey, Iowa, September 6, from cerebral thrombosis, after an illness of two weeks, aged 87.

B. FRANK PARK, M. D., 1901, a member of the American Medical Association, a rising young physician of Omaha, and an instructor in the Omaha Medical College, died suddenly while making a professional call, September 8, from cerebral hemorrhage, aged 28.

WILLIAM BROWN, M. D., 1881, died at his home in Chicago, September 14.

EDGAR S. HOOPER, M. D., 1895, a member of the American Medical Association, Wisconsin State Medical Society, Central Wisconsin Medical Society and Lafayette County Medical Society, died recently at his home in Darlington, Wis., after a long illness from tuberculosis, aged 36.

EDMUND J. HOWARD, M. D., 1888, of Corydon, Iowa, died at Saline, Ore., September 22.

JAMES EARL COX, M. D., 1896, of Belleplaine, Iowa, died at Canon City, Col., September 30, from tuberculosis, after an illness of nearly two years, aged 30.

JOSEPH W. DOSTAL, M. D., 1892, died at his home in Chicago, October 4, aged 36.

FREDERICK COLE, M. D., 1865, formerly of El Paso, Ill., surgeon of the One Hundred and Fifty-first Illinois Volunteer Infantry in the Civil war, died about September 30, at his home in Garden City, Kan., aged 76.

PERCY E. TERRY, M. D., 1886, died at his home in Rochester, Ind., September 30, from spinal disease, after an illness of two months, aged 44.

JOHN O. DAWSON, M. D., 1879, a member of the American Medical Association, and a leading practitioner of Lincoln, Neb., died suddenly at his office in that city, October 18, from angina pectoris, aged 57.

EVERETT VAN BUREN, M. D., 1869, formerly of Hooper, Dodge County, Neb., surgeon of the Eighth United States Colored Heavy Artillery, of the One Hundred and Forty-seventh Illinois Volunteer Infantry, and later in charge of the First Brigade Hospital, Second Division of the Army of the Cumberland in the civil war; for six years a member of the Fremont (Neb.) city council; once vice-president of the Nebraska State Medical Society; twice coroner of Dodge County, Neb., and president of the city council of Hooper, died at the Soldier's Home, Grand Island, Neb., October 26.

JAMES G. BOARDMAN, M. D., 1865, coroner of Stark County, Ill., for many years, died at his home in Bradford, Ill., from pneumonia, October 29, after a short illness, aged 65.

G. F. THEODORE HOFFMANN, M. D., 1861, died at his home in Niles, Ill., November 2, from bronchial pneumonia, after an illness of six days, aged 85.

HENRY HOBART MAYNARD, M. D., 1861, of Los Angeles, Cal., assistant surgeon of the Eighteenth Iowa Volunteer Infantry, later surgeon of the Second Arkansas Volunteer Cavalry, and then chief surgeon of division during the civil war; a member of the Medical Society of the State of California and the Los Angeles County Medical Society; superintendent of the Los Angeles County Hospital in 1886 and 1887, and professor of surgery in the College of Medicine of the University of Southern California until 1901, when he was made emeritus professor, died at Pacific Hospital, Los Angeles, November 4, from uremia, after an illness of a month, aged 69.

RUFUS H. BARTLETT, M. D., 1879, a member of the American Medical Association; chief medical examiner of the Aetna Life Insurance Company in Chicago; a member of the Chicago Medical Society, Chicago Medicolegal Society, Chicago Pathological Society and Chicago Medical Examiner's Association, died at his home in Chicago, Nov. 21, from typhoid fever, aged 50.

FRANK H. RUSSEL, M. D., 1899, died at his home in Kewanee, Ill., November 2, from tuberculosis, after an illness of more than a year, aged 35.

WILLIAM B. DUNKLE, M. D., 1863, ded at his home in Gelinan, Iowa, Nov. 14, aged 70.

NORMAN L. JONES, M. D., 1882, died at his home in Norton, Kan., November 17, from intestinal obstruction for which an operation was made a few hours before.

JAMES L. REECE, M. D., 1888; in 1898 representative from St. Joseph County in the legislature; local surgeon of the Wabash railroad; for many years president of the board of education of North Liberty, Ind., died at his home in that place, November 18, after a prolonged illness, from tuberculosis of the bones, aged 49.

JOHN WILLIAM GREEN, M. D., 1889, died at his home in Lacy, Iowa, November, 21, from uremia, after a short illness.

HENRY J. THOMAS, M. D., 1873, surgeon in the army during the Spanish-American war, died at his home in Winston-Salem, N. C. November 29, from pneumonia, after an illness of one week, aged 55.

SYLVESTER THOMPSON, M. D., 1885, died at his home in Galva, Ill., November 28, 1905, from pneumonia, after a short illness.

DANIEL MAXON COOL, M. D., 1861, for several years professor of diseases of children in the Chicago Medical College; surgeon of the Third Iowa Volunteer Infantry during the civil war; some-time member of the American Medical Association, Minnesota State Medical Society, and Rice County Medical Society; for nine years health commissioner and for many years city physician of Faribault, Minn., died at his home in that city, December 14, from heart disease, after a long period of invalidism, aged 82.

LEHMAN H. DUNNING, M. D., 1872; member of the American Medical Association and chairman of the section on Obstetrics and Diseases of Women in 1904; member of the Indiana State Medical Society, and president of the Marion County Medical Society; member of the American Association of Obstetricians and Gynecologists; delegate to the Ninth International Medical Congress; professor of diseases of women in the Medical College of Indiana; consulting surgeon to the Indianapolis City Hospital and City Dispensary; chief of staff of and gynecologist to the Deaconess Hospital, Indianapolis, died at his home in that city, January 4, from heart disease at the age of 55.

FRANCIS DUNCAN, M. D., 1900, of the American Medical Association and a promising young physician of Chicago, died suddenly from heart disease at San Diego, Cal., January 2, aged 30. He had been married only ten days before.



GEORGE H. GERMAIN, M. D., 1894, of Ponca City, Okla., died at St. Francis Hospital, Wichita, Kan., Jan. 3, from septicemia, following a railway accident four days before, in which his foot was crushed, necessitating amputation.

CLARK R. WARREN, M. D., 1876, a veteran of the civil war, and for many years a practitioner of Otis, Ind., died at his home in Chicago, January 2, from brain tumor, after an illness of eight weeks, aged 65.

WILLIAM H. BRIGHT, M. D., 1865, died at his home in Martinsburg, Ind., January 13, aged 74.

LOUIS THOMPSON STURGIS, M. D., 1882, a well-known physician of Fort Wayne, Ind., died at his home in that city, January 15, from nephritis, after an extended illness, aged 57.

ELMER FULLER, M. D., 1902, died at his home in Adrian Mich., from influenza, January 25, after an illness of about one month, age 43.

FRANCIS GRIFFIN, M. D., 1869; a veteran of the civil war; for many years treasurer for the local school district, died at his home in Mapleton, Iowa, February 6, from heart disease, after an illness of two years, aged 59.

JAMES G. CONNER, M. D., 1867, health officer of Ionia, Mich., died suddenly at his office in that city and was buried February 11.

WILLIAM WILSON TORRENCE, M. D., 1880, a member of the American Medical Association, Illinois State Medical Society and Black Hills Medical Society; honorary member of the North Central Illinois Medical Association; member of the American Association for the Advancement of Science; formerly a well-known physician of Deadwood, S. D., and prior to that time a missionary of the Presbyterian board in Teheran, Persia, and physician to the Shah, died at St. Joseph's Hospital, Denver, February 13, after a long illness, aged 50.

GEORGE SMITH GOULD, M. D., 1896, died suddenly in Cleveland February 10.

THOMAS KELLEY, M. D., 1871; a veteran of the civil war; for thirty-five years a physician of the Santa Clara Valley, Cal.; for one term county physician, and once president of the Santa Clara County Medical Society; from 1899 to 1904 postmaster of San Jose, Cal.; died at his home in that city, February 14, from fatty degeneration of the heart, after a long illness, aged 69.

L. P. ROGERS, M. D., 1876, of Beatrice, Neb., formerly a practitioner of Buffalo, Ill., was instantly killed February 25, at Godfrey, Ill., by falling under the wheels of a passenger train.

W. H. BURKE, M. D., 1902, of Prairieburg, Iowa, died March 1, from pneumonia, after an illness of less than two weeks.

NELSON H. CHURCH, M. D., 1869, died March 5, at his home in Chicago, aged 63.

EUGENE S. ATWOOD, M. D., 1877, died at his home in Chicago, March 2.

SEMON R. HEWETT, M. D., 1867; local surgeon at Charles City, Iowa, of the Chicago, Milwaukee & St. Paul Railway; health officer of Charles City; member of the International Association of Railway Surgeons, Austin Flint-Cedar Valley Medical Society, and for many terms president of the Floyd County Medical Society; assistant surgeon in the United States Marine Hospital Service during the civil war, died at his home in Charles City, March 4, from heart disease, aged 75.

JARA H. GILLUM, M. D., 1874; a veteran in the civil war; member of the Indiana legislature; chairman of the Iroquois County (Ill.) board of supervisors, and alderman of Milford, Ill., died at his home in that city, March 7, from cerebral hemorrhage.

W. H. KING, M. D., died at his home in Carthage, Mo., March 20, from pneumonia, after an illness of one week, aged 61.

JAMES M. HARMAN, M. D., 1876, of Fairport, Mo., died at Excelsior Springs, Mo., March 12, from nephritis, aged 51.

FRED S. HUNT, M. D., 1881, of Stuart, Neb., was instantly killed while attempting to board a freight train at O'Neill, Neb., March 23.

DANIEL A. DAKIN, M. D., 1870; a member and once president of the Wayne County Medical Society, died suddenly at his home in Detroit, April 2, from heart disease, aged 69.

JAMES MORRIS CRABB, M. D., 1904; recently of Ashton, S. D., died Nov. 23, 1905, in the Presbyterian Hospital, Chicago, from sacro-iliac tuberculosis, aged 37.

EDGAR A. AIKMAN, M. D., 1891; a member of the American Medical Association, and one of the best known physicians of Vermilion County, Ind., died at his home in Clinton, April 11.

MICHAEL A. GLENNAN, M. D., 1878, died at his home in Ludlow, Ill., from kidney disease, April 11.

GEORGE W. BEGGS, M. D., 1862; a pioneer physician of Sioux City, Iowa; surgeon of the One Hundred and Sixth Illinois Volunteer Infantry during the civil war; a member of the local and state medical societies and the Association of Military Surgeons of the United States; surgeon general of the Union Veteran Army of the United States in 1885; for many years local surgeon for the Illinois Central and Chicago, Milwaukee & St. Paul railroads, and president of the Sioux City College of Medicine for ten years died at his home in Sioux City, April 10, from kidney disease, after an illness of two years, aged 69.

LORENZO DOW GLAZEBROOK, M. D., 1857; deputy revenue collector for the Ninth District of Indiana for three years; in 1872 and 1885 representative in the General Assembly, died at his home in Knox, Ind., after an illness of six months, from senile debility, aged 76.

THOMAS P. BARK, M. D., 1871, died at his home in Ruma, Ill., August 8, 1905, from valvular heart disease, aged 63.

FRANCIS MCGUIRE, M. D., 1868, died recently at his home in St. Cloud, Minn.

SAMUEL L. MARSTON, M. D., 1863; assistant surgeon of the Twelfth Wisconsin Volunteer Infantry during the civil war, died at his home in Hartford, Wis., April 22, aged 78.

CHARLES ELLIOTT SEAN, M. D., 1899, died at his home in Whiting, Ind., April 29.

ROBERT N. RICKEY, M. D., 1869; while despondent on account of ill-health, committed suicide by taking morphine, at his home in Gray's Lake, Ill., April 30, aged 55.

WILLIAM CLARENCE EGAN, M. D., 1875; a veteran of the civil war; a member of the Iowa State Medical Society, and some-time physician of Atlantic and of Cass County, died at his home in Atlantic, May 1, from valvular heart disease, after a prolonged illness, aged 59. At a meeting of the physicians of Atlantic, May 2, resolutions of respect to the memory of Dr. Egan were unanimously adopted.

ANDREW M. CRAWFORD, M. D., 1877, a retired practitioner of Denver, died from the effects of an overdose of acetanilid, in his apartments in Denver, May 2.

DAVID ERNEST SEDGWICK, M. D., 1877, formerly a member of the Wisconsin legislature, died at his home in York, Neb., May 17, from heart disease, aged 55.

I regret that the brevity enforced in occasions like this will permit so little liberty of expanse upon the lives and workings of many of our departed brothers. The impressive lessons that always find their way into our hearts concerning life and immortality have been abundantly suggested in many of the short biographies read here tonight.

Coming up, as many of them did, from humble lives, they have written their names upon the record of their state and nation in a way never to be erased. And these ceremonies tonight are but to remind those who come after that the reward of faithful service is the token of respect by the citizens of the community.

The lesson comes to us to-day with great effect that we are passing away, that we are rapidly passing off the stage of action, that the places that now know us will soon be filled by other, and the admonition is that we so conduct ourselves here that hereafter we may meet the reward of the just upon the other side.

CHAS. J. WHALEN, '91.

#### MEMBERSHIP LIST.

The following Alumni paid dues or contributed \$1.00 or more toward the Fellowship Fund since the last issue of the Bulletin, June, 1906.

If the name of anyone who contributed \$1.00 or more since the last issue of the Bulletin is not included in this list, please notify the Sec'y and Treas.

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# The Bulletin

## OF THE ALUMNI OF RUSH MEDICAL COLLEGE

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B. M. LINNELL, Editor

100 State Street, CHICAGO, ILL.

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### COMMENCEMENT EXERCISES.

The Quarterly Commencement Exercises occurred at the end of the Summer Quarter occurred in the Upper Amphitheater, Thursday, August 30, 1906.

Dr. Dean D. Lewis, of the Faculty, delivered the address on "Medical Opportunities."

The following candidates received the Degree, Medicinæ Doctor:

Orville Lewis Adams, Joseph Henry Blomer, Vincent Russell Boynton, Ora George Brubake, Edward P. Christensen, Charles Fidler, Walter Wile Hamburger, Clinton Luman Hoy, Morton Leon Hunt, John Baxter Kinne, Paul Dean McCarty, Frank Woodward Metcalf, Selim Nahas, Edward Joseph O'Brien, James Gibson Olemvena, Thomas Redmond, Walter Gustavus Rundle, Herman Call Runyan, Hall H Thomas, Thomas Olearius Whitacre, Sanford Archibald Winsor.

The Quarterly Commencement Exercises at the end of the Autumn Quarter occurred in the Upper Amphitheater, Thursday, Dec. 20, 1906.

Dr. George E. Shoubaugh, of the Faculty, delivered the address on "The Preparation of the Specialist—a Problem of Medical Education."

The following candidates received the Degree, Medicinæ Doctor:

Arthur Joseph Batty, Winthrop Severance Chapman, Charles Homer Gowan, Carl August Heise, Allen Perry Johnston, Edwin Manson Neher, Thomas Matheson Wilson.

### BULLETIN TO BE ISSUED EVERY TWO MONTHS.

The next issue of THE BULLETIN will appear in February, and every two months following. If sufficient encouragement is given in the enterprise, we hope to publish it every month. Suggestions from the Alumni are sought as to the features desired. Write the Secretary or any member of the Executive Committee any points you may have to offer.

## RUSH MEDICAL COLLEGE CLINIC.

BY FRANK BILLINGS, M. D.

CHICAGO, ILL., December 17, 1906.

This patient is thirty-five years old, was born in Russia, a tailor by occupation. There is nothing in his family history of importance. His habits have been good. He smokes moderately, uses a small amount of beer and wine and his mode of living has not been of a character to subject him especially to disease of the stomach. He had enjoyed good health until twelve years ago when the symptoms of his present illness began. Seven years ago he had typhoid fever which apparently did not make him better or worse of the present disease. His illness began with a sense of heaviness or oppression in the epigastrium and belching of gas after the meals. Soon this was associated with pain which was centralized in the upper part of the epigastrium and came on about two to three hours after the meals. The pain persisted for an hour or longer but was relieved instantly by induced vomiting. At this time solid food caused a greater amount of distress than liquids or soft solids. These symptoms continued for three or four weeks and then there was an interval of comparative freedom from all symptoms which was followed by a period of distress in which the above symptoms recurred for a period of a few weeks. Such periods of distress and intervals of comparative freedom from the symptoms repeated themselves up to the present time. Gradually the symptoms became more severe in the sense that the pain was worse, occurred a little nearer the time of taking food and vomiting was more constant. Vomiting usually relieved the pain. During the attacks he was forced to take less of solid food but when the attack was over he returned to an ordinary diet. The intervals without symptoms grew shorter and finally there was always more or less discomfort, usually a sense of weight or oppression with gas and some relief of these symptoms by eructation of gas. Two months ago he became much worse and since that time has had pain of a severe type which has occurred soon after taking food and vomiting occurred practically after every meal. The appetite remained good. He lost in weight, at first gradually and recently more rapidly. Twelve years ago he weighed 180 pounds and his present weight is 120. At no time has he noticed the appearance of blood in the vomiting material or in the stool.

He presents the appearance of a young man whose general nutrition does not appear bad. The skin is of good color and the mucous membrane of lips, tongue and eyes is of normal rosy hue. The subcutaneous fat is missing but his muscle bulk is not small and his muscles appear to be firm and of good tone. The blood examination shows a very moderate anemia but a condition of the blood, nearly if not quite as good as the average normal. The hemoglobin with the Dare instrument is from 75 to 79 per cent, the red cells 4,300,000 and the white cells 7,000. An examination of the chest fails to reveal any organic disease of the lungs and one cannot discover any palpable enlargement of the superficial lymph glands. On inspection, the belly does not present any irregularity in form. Upon palpation the liver does not appear to be enlarged or tender and the spleen cannot be palpated. No tumor can be felt in the region of the stomach or over the usual situation of the colon and small intestine. There is a relative resistance over the head of the right rectus muscle. In a small area over the head of this muscle there is a marked tenderness which is aggravated by deep pressure and especially when the patient takes a long inspiration. No definite mass can be made out by palpation. Upon percussion over this tender area considerable pain is produced which makes the patient shrink when the blow is struck. When the stomach is distended with gas produced by giving him 30 gr. of tartaric acid in solution and 60 gr. bicarbonate of soda, the greater curvature is seen to extend just to the umbilicus or a little below it and the lesser curvature appears to be just below the ensiform appendix. When the stomach is so distended it can be felt and appears

to the touch like a tense air filled bag. At the time the patient complains of severe pain in the epigastrium, at the site of the pain which has been present for so many years, and the tenderness in the pyloric region and the region of the gall bladder is very much intensified. The tonic spasm of the stomach produced by the presence of the gas remains for a considerable period as you see and the patient is uneasy and restless and makes an effort to belch. In other words the gas does not appear to pass through the pylorus and finally the patient is relieved of his suffering by the eructation of a large amount of the gas and then we find that the spasm of the walls of the stomach diminishes.

We have given this patient test meals. Yesterday morning he had two shredded wheat biscuits which he masticated thoroughly and swallowed with a glass and a half of water. An hour later the stomach contents were aspired examined. The total acidity was 60 degrees of which 35 degrees were free HCe and 25 degrees combined HCe and acid salts. There was no lactic acid and microscopical examination failed to reveal blood cells, bacteria, sarcinae, yeast or any other abnormal element. Last night he was given a dinner consisting of meat, bread, potato, some raspberry jam containing seed and this morning, ten hours later, the stomach tube revealed 40 cc's of a waterlike liquid containing white flocculi. An analysis of this liquid showed 45 degrees total acidity of which 35 degrees were free HCe and the remainder combined HCe and acid salts. There was no lactic acid. In other words the fasting stomach contained gastric juice, secreted after the food had left the stomach. The flocculi were made up of some starch cells which remained undigested with many budding yeast cells and a good many leucocytes which indicated an irritated if not an ulcerated mucous membrane. This morning he again had the shredded wheat biscuit and water at 8 o'clock and we will draw his stomach contents and make an examination. The stomach tube passes easily into the stomach and the conditions show the presence of a reddish-brown, granular mass. This, examined, shows 80 degrees of total acidity of which 60 degrees is free HCe and 20 degrees combined HCe and acid salts without lactic acid. The microscopic examination shows the presence of blood cells, some yeast cells and a few leucocytes but no bacilli and no sarcinae. Already we have examined the stools twice and have not detected occult blood.

To recapitulate: A young man 35 years has suffered for 12 years from periodic attacks of epigastric oppression and pain with more or less gas from one to three hours after his meals with relief of the pain by vomiting. The intervals without symptom or with only moderate evidences of dyspepsia have decreased in length until finally his suffering was constant and more severe. The pain was circumscribed, occurred in the region of the pylorus, was always relieved by vomiting or emptying the stomach and although he had lost a great deal in weight, his blood condition and muscle nutrition remained fairly good. With this history and these symptoms, we find a moderate insufficiency of the stomach with a moderate stasis, a continued secretion of HCe after the food has passed, a hyperchlorhydria with the presence of blood, leucocytes—some of which are digested, great pain in the region of the pylorus upon distention of the stomach with gas and a tonic spastic contraction of the stomach when so distended.

This patient gives a typical history and the finding is also typical of a chronic ulcer of the stomach situated at or near the pylorus with the development of scar tissue partially obstructing the pylorus and at the same time formation of adhesions between the stomach and the organs immediately about it,—the gall bladder, liver, etc. Such a history indicates intervals of latency in chronic ulcer with periods of exacerbations extending over an unusually long period. The disturbance of the motor power as evinced by the tests after a full meal indicates interference with the pylorus and with drainage of the stomach, while the severe circumscribed pain which is elicited by palpation or by percussion over a circumscribed area with aggra-



vation of the pain when the stomach is distended with gas, indicates the presence of perigastric adhesions. The stomach cramp which is elicited by gaseous distension is also indicative of pyloric obstruction which may occur from pyloric spasm but when one considers, the history in this case indicates organic stenosis.

Cholecystitis may exist for years and adhesions may occur between it and the stomach and results in symptoms somewhat like those presented by the patient. Usually, however, there are other conditions which may occur and enable us to distinguish a cholecystitis from an ulcer. That is, the probable occurrence of jaundice, more or less enlargement of the liver at the time of acute attacks of pain with tenderness of the organ and usually the pyloric stenosis is not as marked and spasms of the stomach do not occur when it is distended nor does the presence of food cause such severe pain as in ulcer. Ulcer of the duodenum which occurs in its first inch or inch and a half, may produce symptoms which correspond to those we have elicited from our patient but ordinarily it runs a more latent course. If, however, it involves the pyloric ring, the symptoms may occur as in this patient. We know that carcinoma may grow upon an ulcer base and especially if the ulcer exists for a long period. It is possible that it may be present here but the absence of constant blood in the stool and stomach contents and the absence of cachexia and anemia are negative of this.

Therefore our diagnosis is a chronic ulcer of the stomach at or near the pylorus, the formation of scar tissue partially obstructing the pylorus; the formation of perigastric adhesions causing severe pain when the stomach is distended.

This diagnosis indicates a surgical condition and we would not attempt to treat this individual medically by the usual rest treatment, rectal feeding, etc. The operation which will be done to relieve him will depend upon the conditions found when the laparotomy is made. If the ulcer is still open and if the conditions will permit the ulcer bearing area and the pylorus will be removed, the stump of the stomach and duodenum closed and a gastroenterostomy then performed, or the stump of the duodenum and stomach may be brought together if the surgeon thinks it may be safely done. If, on the other hand, conditions are found which would make a pylorotomy impossible or dangerous for the life of the patient, and especially if a stenosis of the pylorus exist, then a posterior gastrojejunostomy will be performed. Our experience with surgical treatment of ulcer of the stomach while large has not yet covered a sufficient period of time to enable us to say that the treatment is always successful from a physiologic point of view. Gastroenterostomy which has been performed more than any other operation for ulcer, has failed in some instances to heal the ulcer or prevent the formation of other ulcers when the pylorus was not stenosed. In some instances the artificial opening becomes smaller and the stomach contents again pass through the pylorus without cure of the condition for which the operation was done. This operation is more successful in curing patients when the pylorus is stenosed. Therefore, when the pylorus is open it is, I think, the opinion of surgeons that pylorotomy is the ideal operation when it may be performed.

Note:—This patient was operated upon in clinic on the next day by Prof. J. B. Murphy. The diagnosis was confirmed. A chronic ulcer, scar tissue formation stenosing the pylorus and perigastric adhesions were found. The condition was such that pylorotomy was not deemed advisable and a posterior gastrojejunostomy was performed.

## TWO WEEKS OF SPECIAL CLINICS FOR THE ALUMNI.

Arrangements are being made for two weeks of special clinics for the Alumni following the Graduating Exercises which occur Wednesday, June 12, 1907.

Arena clinics will be given by the heads of the departments with

material selected of especial interest to the practitioners. Then there will be opportunity for laboratory work and special courses in the hospitals and dispensaries. The program will follow the schedules already published and sent out to the Alumni. Such additions will be made as are warranted by the demand.

We hope, in February, to publish a more detailed account of this work.

### REPORTS OF CLINICS.

It is proposed to publish in each issue of THE BULLETIN a Clinical Report. This issue contains a report by Dr. Frank Billings, the Senior Dean of the Faculty of Rush Medical College and head of the Department of Medicine. The articles will be short and practical and deal with clinical cases presented in the regular clinics. This will not crowd out the other features of THE BULLETIN. The Biographies will be continued and the affairs of the Alumni Association reported.

'48. **Daniel M. Camerer**, Chrisman, Illinois, entered Rush Medical College in 1846, previous to which he had spent three years in the office of Dr. John Tenbrook, Paris, Illinois. After graduating, he practiced for about twenty-five years at Logan, Illinois. He took post-graduate work at Rush in 1862. Is still in active practice. He has been married twice, and has had four children. Only one is living, Dr. George V. Camerer, Rush '80, who is practicing at Kinmundy, Illinois.

'51. **Arthur McCalla Thome**, Chicago, entered Rush in 1850. Previous education at the Seminary and College at Augusta, Kentucky, and at Oberlin College, and in the Cleveland Medical College, Ohio. He practiced medicine in Primrose and south-eastern Iowa from 1851 to 1864. He is now eighty-four years of age. In 1865 he retired from the practice of medicine and became a minister in the Congregational church. He was married in 1851 and has three children. One is Dr. Arthur G. Thome, of Chicago. He has been connected with the church since his youth; in politics, has always been a Republican. In the spring of 1863 he was in the Army Hospital Service, and was Assistant Surgeon, 60th Infantry, U. S. A. At present he is living with his son, the Doctor, and has been obliged to give up preaching on account of poor health.

'54. **Charles Douglas Watson**, Ontario, California, entered Rush in 1851. Practiced at Covington, Indiana, until May, 1885; since then at his present address. Two nephews of his, C. V. Jones, Jr., and Norman L. Jones, '82, have attended Rush. Was Q. M. Sergt. and (detailed) Acting Assistant Surgeon 18th Indiana Battery, Light Artillery, Assistant Surgeon 54th Indiana Infantry (not mustered) and Acting Assistant Surgeon U. S. A., during the Civil War. He was compelled to retire from the service in consequence of a chronic diarrhoea contracted in his first command, and from which he has never recovered.

'57. **Thomas J. Shreves**, Des Moines, Iowa, entered Rush in September, 1855. He has practiced in Greenbush and Bushnell, Illinois, and Panora and Des Moines, Iowa. Makes a specialty of Gynecology. He was professor of Obstetrics in the College of Physicians and Surgeons, Des Moines, '78-'79, and of Gynecology, '79-'81. He married in 1857; has two children, daughters. An uncle of his, James M. Shreves, attended Rush. He is a member of the Presbyterian church, and has been a Republican since 1856. He is still in active practice.

'60. **James L. Thompson**, Indianapolis, Indiana, entered Rush in 1858. Practiced in Rush County, Indiana, for a short time, immediately after graduation. He entered the army during the Civil War and afterward located at Harrison, Ohio. He makes a specialty of Ophthalmology. Has taken post-graduate work at Cincinnati and in Europe. Has been president of the Marion County Medical Society. He was elected second vice president of the American Medical Association at Denver, Colorado. Has two children, a son and a daughter. The son, Dr. Daniel A. Thompson, was professor of Ophthalmology in the Medical College of Indiana until his death, in 1904. His daughter is the wife of Dr. J. H. Oliver, professor of Surgery in the same college. He is still in active practice, and is a member of A. M. A., Indiana State and Marion County Medical Societies.

'62. **Elijah Warren Boyles**, Clay City, Illinois, entered Rush in 1861. Took post-graduate work at Rush in 1880. Is United States Examining Surgeon for pensions. He has had nine children, of whom five (all boys) are living. One son, J. W. Boyles, is a physician and practices with him.

**62. Thomas G. Drake**, Prairieton, Indiana. Educated in high school in Bowling Green, Kentucky. Married in 1862, and has four children living. He has had two sons at Rush, T. A. Drake, '86, and J. F. Drake, '90. He is an ordained minister of the "old school" Baptist church. He is doing voluntary evangelical work without financial remuneration. He retired about ten years ago, but still goes in consultation, or in cases of emergency. He is a member of the Vigo County Medical Society.

**63. John McLean**, Chicago, entered Rush in October, 1862. He had attended a course of lectures in the St. Louis Medical College previous to coming to Rush. He practiced in Duquoin, Illinois, from 1863 to 1881. In 1879 he did post-graduate work. Makes a specialty of surgery. He is married and has one son. A nephew, William W. Hall, '67, is a graduate of Rush. His son is a doctor, and attended Rush. He was a soldier during the Civil War, 2d Lieutenant, Company A, 40th Illinois Volunteers, and was wounded in the battle of Shiloh. In consequence, he suffered an amputation of the left leg at the lower portion. He is the surgeon for the Pullman Company, and local surgeon for the Illinois Central railway. Is an Odd Fellow, Loyal Legioner, and a G. A. R. He is a member of the Chicago Medical Society and A. M. A.

**63. H. W. Sigworth**, Anamosa, Iowa, entered Rush in October, 1861, having prepared at the Wisconsin State University. He practiced at Wanbeck, Iowa, until 1877. Is married and has had six children, four of whom are living. Has had three sons at Rush, Dwight L., '86, Harry, '99, and Fred B., '00; and a brother, M. P., '66. He made a tour of Europe in 1897. Is a member of the Baptist church. He was in the Civil War, Company H, 67th Illinois Regiment. Is still in active practice with two of his sons, Fred B. and Harry W. The other son died in 1896. He is a Mason, Odd Fellow, and a member of the G. A. R. Belongs to the Iowa State and Jones County Medical Societies and A. M. A.

**63. Frank C. Mehler**, New London, Iowa, entered Rush in 1860. He practiced medicine in Chicago until 1871, when he removed to his present location. He has taken post-graduate work in the Chicago Policlinic. Is a member of the following societies: Henry County, Southeastern Iowa District, Des Moines Valley, Iowa State and Tri-State Medical, Iowa State Railway Surgeons Association, and A. M. A. Is a widower; has two children, one a doctor.

**63. Hiram M. Keyser**, Moline, Ill., entered Rush in October, 1861, after graduating with the degree A. B. from Mt. Pleasant College. In 1870 he was appointed U. S. Pension Surgeon, and in 1875 Receiver and Disbursing Agent of U. S. Land Office, Hebra, Mont. In 1886 he was elected representative 35th General Assembly Illinois, 16th district.

**63. Frederick W. Byers**, Monroe, Wis., entered Rush in Oct., 1861. Previous education at Cooperston, Penna., and Wittenberg College, Springfield, Ohio. After graduating, he served as Assistant Surgeon in the army till 1865, and then practiced at Warren and Lena, Ill., previous to going to Monroe, Wis. He has done post-graduate work at the University of Nashville, and at the Missouri and St. Louis Medical Colleges. He is Past Post Commander of Pinney G. A. R. and Medical Director of the Department of Wisconsin. He was a regimental surgeon in the Wisconsin National Guard from 1882 to 1895, when he was commissioned Surgeon General. He served until 1889, and was then placed on the retired list. Is now an honorary member of the Association of Military Surgeons of the United States, and also of the Southern Wisconsin Medical Association. He is still in active general practice. Is a member of the Wisconsin State Medical Society. He has written articles on military subjects and state militia reports, and has published a number of poems, "Rainy Day Reveries," "Old Memories," "Pleasant Hill School House," "The Meeting House Over the Way," etc. Was a member of the Wisconsin Assembly, 1885-1886. He is Vice-Commander of the Wisconsin Commandry of the Loyal Legion, and a member of the Commandery-in-Chief U. S. Loyal Legion. Is married and has five children living. James J. Wakefield, of the class of '68, was a relative of his.

**64. C. A. Bucher**, Fitzgerald, Georgia, entered Rush in 1860. He served as Assistant Surgeon of the 124th Regiment from September, 1862 till April, 1863, when he was discharged and came home to graduate at Rush in 1864. He then went back to the army as First Assistant Surgeon of the 72nd Regiment, Illinois Infantry, and was discharged with the regiment in 1865. Has practiced in Chicago and Batavia, Ill. Was a member of the Chicago Medical and Pathological Societies, and was president of the Fox River Medical Society for one



term. He has been a Master Mason fifty-three years, and Master of the Lodge sixteen years; is a Royal Arch Mason, Knight Templar, and at present King of the Chapter of Royal Masons. Was coroner of Kane County, Illinois, for eight years, school trustee of the town of Batavia for nine years, alderman of Batavia six years, and of Fitzgerald two years. Is a widower, and has had three children, one of whom is dead.

'64. **Lyman F. Babcock**, Deadwood, South Dakota, entered Rush in 1862. Was in the War of the Rebellion, 1864-1865, and afterward practiced ten years in Omaha, Nebraska. He has practiced in Deadwood since 1876. Is a member of the District and South Dakota Medical Societies. He is a widower; has one son, a dentist.

'64. **George F. Beasley**, Lafayette, Indiana, entered Rush in 1861. He was in the United States Navy from March, 1864 to September, 1865, ranking as Acting Assistant Surgeon. Is married, but has no children. Is a Mason, and belongs to the Knights of Pythias. He is a member of the Tippecanoe County and of the Indiana State Medical Societies, and of the A. M. A. Is surgeon for the Wabash, Big Four, Lake Erie & Western and Monon railways.

'65. **Horatio B. Withers**, Mineral Wells, Texas, entered Rush in 1863. Since graduation he has practiced at Hardin and Rantoul, Illinois, and Lebanon, Mo. Is a member of Palo Pinto and State Medical Societies of Texas. Is a member of the Christian Church and an Odd Fellow. Is married and has had three children, two of whom are living.

'65. **John Wesley Trueworthy**, Los Angeles, California, entered Rush in 1864, after preparing at the academy at Hillsboro, Illinois, and at the University of Michigan. Practiced in Emporia, Kansas, from 1865 to 1882; Kansas City, Missouri, 1882 to 1892; and at Los Angeles, California, to date. Took post-graduate work in New York in 1896. Was examining surgeon for pensions from 1867 to 1876, and was coroner of Lyon county, Kansas, and member of the board of education of Emporia, Kansas, for several years. Is president of the board of directors of the Public Library of Los Angeles. He is a member of the University Club, the Sierra Club and the California Club, of Los Angeles; has been president of the Academy of Medicine of Los Angeles, and is a member of the State and County Medical Societies of California, and the A. M. A., and was a member of the Pan-American Congress.

'66. **T. N. Bone**, Loda, Illinois, entered Rush in 1863 on advice of Dr. Adkins, his preceptor. Is still engaged in active practice. Belongs to the Iroquois-Ford County, and Illinois State Medical Societies, and the A. M. A. He is married and has two daughters.

'68. **James R. Hartnett**, Neenah, Wisconsin, entered Rush in 1866, having prepared at the Lawrence Academy. From '68 to '71 he practiced at Rochester, Illinois. He has done post-graduate work in the Chicago Hospital. He was president of the Wisconsin State Medical Society in 1888 and has been president of the Fox River Medical Society and of the Rush Alumni Association. He has been superintendent of the city school. He is chief examiner of the Equitable Fraternal Union. He is married and has three children, two sons, one of whom, James R., Jr., is a graduate of Rush of '97. His brother, Charles F., through whom he came to Rush, is a graduate of the institution of 1860. He was in the Civil War, First Lieutenant, Company I, First Wisconsin Cavalry. He has written numerous articles on subjects both medical and surgical. He is a member of the following medical societies: Winnebago County, Fox River Valley, Wisconsin State, Railway Surgeons, and the A. M. A.

'69. **Byron N. Stevens**, Chillicothe, Missouri, entered Rush in 1867. He took post-graduate work in the New York Polyclinic, '86. He is still in active practice. He was president of Grand River District Medical Association of Missouri; also was a U. S. pension examiner. He has been a member of the Chillicothe Board of Health. He is a member of the following lodges: P. W., Chillicothe Lodge A. O. U. W., and C. He served in '64 in the Civil War as Second Lieutenant in the Forty-first Wisconsin Volunteer Infantry, Company B. He is a member of the Livingston County Medical Society and the Grand River District Medical Society and the A. M. A. He has published several articles. He is married and has had four children, two of whom are living.

'69. **Justin J. Leavitt**, Molalla, Oregon. He was prepared at Galesville University, Galesville, Wisconsin. He entered Rush in 1867. He has practiced since graduation at Pennimore, Wisconsin, to 1882, Clark, South Dakota, 1882-6; since then at his present address. He is engaged in general practice and is still active. He took post-graduate work in 1875 at the College of P. and S., New York, and University of New York. He is a member

of the Oregon City Board of Pension Examiners. He is a member of the following societies: Clackamas County, Oregon; Grant County, Wisconsin, and the Wisconsin State. He was a hospital steward in the Civil War, 1861-1863, and connected with the Eighth Wisconsin Infantry. He is a Mason and an Oddfellow, and is a member of the M. E. Church. He is married and has two children, one son and a daughter.

**'69. Ezra M. Friermood**, Greentown, Indiana. He entered Rush in 1867. Since graduation he has practiced at North Grove, Wabash, Amboy and Peru, Indiana. He served three years in the Ninety-ninth Infantry, Indiana, and was on the famous march to the sea with General Sherman. He is U. S. pension examiner at Kokomo, Indiana. He is a member of the Howard County and the Indiana State Societies and is now president of the Howard County Society. He belongs to the Masonic order and is a G. A. R. He is married and has had eight children, three of whom are dead. J. E. Baker, a cousin now dead, was a student at Rush.

**'69. Cassidy Chenoweth**, Decatur, Illinois. Entered Rush in 1867, graduated 1869, took post-graduate work in London in 1872. He makes a specialty of internal medicine. He is a member of the Decatur, Illinois, and A. M. A. He has two sons, one of whom is in partnership with him. His father, W. J. Chenoweth, is 83 years of age and still engaged in the active practice of medicine in Decatur, Illinois.

**'69. Russell Broughton**, Rockford, Illinois, entered Rush in 1866. He was prepared at Milton Academy, Milton, Wisconsin. He practiced at Broadhead, Wisconsin, 1869-90, and at Dwight, Illinois, 1890-00. He makes a specialty of toxic drug habits and special nervous diseases. Has taken post-graduate work at Rush. He is married and has two sons. A brother-in-law, Marshall Enfield, lately deceased, was a student at Rush. He belongs to the following medical societies: Winnebago County, Illinois, and Wisconsin State, and the A. M. A.

**'69. William M. Burten**, Plum Bayou, Arkansas, entered Rush in 1868. He was prepared at the Iowa Wesleyan University. He has practiced at Mt. Pleasant, Iowa, Little Rock, Rock Comfort and Ashley Mills, Arkansas. He did post-graduate work at Rush in 1884. His practice is limited to consultation work. He is not in active practice. He was a member of Company I, Fortieth Infantry, Iowa Volunteers, during the Civil War. He is married and has had three children, one of whom is living.

**'70. Benjamin T. Phillips**, Menominee, Michigan, entered Rush in 1868. He was prepared at Lawrence University, Wisconsin. He practiced at Pon-du-Lac, Wisconsin, 1870-71. He has been president of the Wisconsin State Medical Society. He was professor of surgery, anatomy and operative surgery in the Wisconsin College of P. and S., Milwaukee, 1893-94. He was appointed by Governor Fairchild, of Wisconsin, to take charge of the hospital for the injured at the great Peshtigo fire, in 1871. In 1893 he was president and surgeon-in-chief of Lumberman's Hospital. In 1873-4-5 he was chief surgeon of the Provident Hospital, and has been surgeon of the C. & N. W. Railway. He is a member of the following medical societies: Menominee County, Fox River Valley, Michigan State and the A. M. A. He is a member of the U. S. Pension Board of Examiners. He is a member of the Presbyterian Church. He has been member of the School Board for sixteen years, and of the City Council four terms, and has been county and city health officer many times. He is a Mason. He served in the Civil War, first in the Second Wisconsin Cavalry, and, second, in the Thirty-second Wisconsin Infantry; total service from 1861 to 1865, coming up from the rank of corporal, and mustered out as a lieutenant. He is married and has one son.

**'70. John Wesley Tope**, Oak Park, Illinois, entered Rush in 1868. He was prepared at the high school, New Philadelphia, Ohio. He is doing a general practice and makes a specialty of surgery. He was an interne at Cook County Hospital, 1869-71. He was medical superintendent of the Hospital for the Insane at Dunning, 1871-75, and was attending surgeon at Cook County Hospital, 1892-05. He is a member of the following medical societies: Chicago, Illinois State, International Association of Railway Surgeons, and the A. M. A. He served four years in the Civil War in the Thirtieth Ohio Infantry. He is married and has had four children. One son, George B. Tope, was graduated from Rush in '96. He also has a son, John W., Jr., now in preparation at the University of Chicago.

**'70. James Constant Reynolds**, Lake Geneva, Wisconsin, entered Rush in 1868. Previous training at Racine and Beloit Colleges. He practiced 1870-75 at Canton, South Dakota. Did post-graduate work in New York, 1876. Examining surgeon for Wisconsin state troops, Spanish-American War, 1898. He was president of the Second District Medical Society of Wisconsin, 1904. Has been surgeon for C. & N. W. Railway for the past twenty years. He still does a general practice. He is a member of the following

medical societies: Walworth County, Second District, Central Wisconsin, Wisconsin State, and the A. M. A. He is married and has one son. His father, B. O. Reynolds, is a graduate of Rush, 1851. He has been a member of the Wisconsin State Senate for four years. He is a Royal Arch Mason. He was president of the Second District Medical Society from 1904 to 1906.

**70. Charles A. Barnes**, Greenfield, Indiana, entered Rush in 1863, on the advice of his preceptor. He was prepared at high school of Monticello, Indiana. He practiced, 1869-70, at Monon, Indiana; 1870-77, at Goodland, Indiana; 1877-95 at Indianapolis, Indiana, and from 1895-06 at Greenfield, Indiana. Did post-graduate work at Indiana Medical College. He is a member of the following societies: Hancock County and Indiana State, and has been a member of the A. M. A. In 1857 he was a "Jayhawker" with John Brown and General "Jim" Lane in Kansas. In 1858 he was captured by Cheyenne and Sioux Indians on the North Platte River, Nebraska, but was rescued by a detachment under General Harney. In 1861-62 he served in the Army of the Potomac and was discharged on account of ill-health. He is a Presbyterian and a Free Mason. He has been postmaster and pension surgeon. He is married and has two sons, one of whom is a doctor.

**71. Ed. Vernon Anderson**, Woodstock, Illinois, entered Rush in 1868. He was prepared at high school. He practiced three years in Rawley, Iowa, and thirty years in McHenry County, Illinois. He is still in general practice. He has been U. S. pension examiner for ten years past, and county physician for county poor house and asylum for fifteen years. He is a member of the Fox River Valley Medical Society. He is a Presbyterian and a Mason. He is married and has had four children, three of whom are living.

**71. Charles A. White**, Danville, Indiana, entered Rush in 1867. He has practiced at Walcottville, Indiana, 1871-74. He does a general practice and has done post-graduate work at the Chicago Polyclinic. He was president of the U. S. Board of Pension Examiners, 1889-93. He was county health officer for seven years and has been local surgeon for the Big Four Railway Company for fifteen years. He is a member of the following medical societies: County, Mitchell District, Indiana State, and the A. M. A.. He was vice-president of the Indiana State Medical Association in 1904. He served in the Civil War, Company A, One Hundred and Seventeenth Regiment, Indiana Volunteer Infantry, 1861-65. He is a member of the G. A. R., a Mason—BlueLodge up to Scottish Rights, 32nd degree and Mystic Shrine. Also a member of I. O. O. F. and K. of P. lodges. He is a Republican in politics and is a member of M. E. Church. He is married and has two children, both living, one of whom is named Glyndon De Laskie Miller, after a son of Professor Moses Gunn and after Professor De Laskie Miller.

**71. Gallaudet O. Bailey**, Normal, Illinois, entered Rush in 1869. He was prepared at McKindree College, Illinois, from which College he has the degree of B. S. He has practiced at Beatrice, Nebraska, 1871; Fairbury, Nebraska, 1872-76; Minor, Illinois, 1877-1881; Lawndale, Illinois, 1871-1877; Annington, Illinois, 1877-1901. He is married and has ten children, of whom four girls and four boys are living.

**71. Corwin W. Cornell**, Knoxville, Iowa, entered Rush in 1869. He was prepared at Knoxville High School and Keokuk Business College. He has practiced in Wacko, Texas, 1871; Knoxville, Iowa, 1872-77; Chicago 1877-79; and Gunnison, Colorado, 1879-83; since then at the present address. Has done post-graduate work at Chicago polyclinic, 1903. He has been Secretary to the Board of U. S. Pension Examiners since 1896. He is a member of the following medical societies: Des Moines Valley, Marion County, Seventh District, Iowa, Iowa State, National Association of U. S. ber of the Iowa Society of S. A. R. He is a member of the Military Order of the Loyal Legion of the United States, Commandary of the State of Iowa. He is married and has two children.

**71. Norman S. Craig**, Jennings, Louisiana, entered Rush in 1869. He was prepared at Line Springs Academy and by his father, a Presbyterian minister. He does a general practice and has practiced since graduation at Line Springs, Iowa, 1871-72; Lansing, Iowa, 1872-79; Manchester, Iowa, 1879-1902. He took an ad eundam degree at Belevue Hospital Medical College, March 1, 1875. He is a member of the Iowa State Medical Society and the A. M. A. He is a Presbyterian in education and training but now belongs to the Congregational Church. He is married and has three children. One brother, Joseph H., was graduated from Rush in 1875.

**71. E. Fletcher Ingals**, Chicago, Illinois. He entered Rush in 1868 and graduated Feb. 1871. He was prepared at the Rock River Seminary, Mt. Morris, Illinois, and has an honorary A. M. from the old University of Chicago 1876. He has been connected with the Rush Medical College since 1871 as follows: Assistant Professor of Materia Medica 1871-83; Lecturer on Diseases of the Chest, Throat and Nose, 1874-83; Professor of



Laryngology, 1883-1890; Professor of Laryngology and Practice of Medicine, 1890-96; Professor of Diseases of the Chest, Throat and Nose 1896 to the present time; Registrar, 1891-98; Comptroller, 1898 to present time; Professor of Diseases of the Chest, and Throat, N. W. University Woman's Medical School (discontinued) 1879-1898; Professor of Laryngology and Rhinology, Chicago Polyclinic, 1890 to present time; Professorial Lecturer on Medicine, University of Chicago, 1901 to present time. It was mainly through Dr. Ingals' efforts that Rush Medical College became affiliated with the University of Chicago. He has been President of the following societies: American Laryngological Association; American Climatological Association; Illinois State Medical Society, and the Chicago Laryngological and Otological Society. He is a member of the following societies: Chicago Medical; Chicago Pathological; Chicago Laryngological and Otological Society; Illinois State Medical Society; American Climatological; American Laryngological; American Rhinological; Otological and Laryngological; American Society for Prevention of Tuberculosis and the A. M. A. He has written one book and a hundred and fourteen articles for publication. His book "Diseases of the Chest, Throat and Nasal Cavities" has gone through four editions. He has been President of the Citizens' Association of Chicago. He is a member of the Colonial Club, Chicago Athletic Association, Homewood Club, Washington Park Club and the Quadrangle Club. He is a member of the Baptist Church. He is married and has had seven children, four of whom are living. A cousin, Edmond Ingalls, '94, and a nephew, Frank E. Pierce, '98, are graduates of Rush. An uncle, Ephriam Ingals, was also a graduate of Rush and one of the old professors in that college.

**'71. Preston Stebbing**, Bradley, Illinois, entered Rush in 1870. One of his preceptors was Daniel Brainard, the founder of the College. He practiced in Grand Rapids, Wisconsin, 1866-76. He has partially retired. He made a specialty of surgery. He is a member of the following societies: Tri-county, Kankakee County and Illinois State. He is a communicant of the Episcopal Church. He is married and has had five children, one of whom is living. Two of his relatives, Horace Stebbing, Jr., Englewood, and Charles Stebbing, Jr., Park Ridge, have taken courses at Rush.

**'72. Albert Chenoweth**, Camanche, Iowa, entered Rush in 1868. He took his preparatory training at the Decatur High School. He has practiced in Chicago, Decatur, Illinois, and Wellington, Kansas. He is doing a general practice. He was a member of the House Staff of Cook County Hospital 1872-73. He was acting Assistant Surgeon, U. S. A. 1887-77. He is a member of the Alumni Association of Cook County Hospital. He is a deacon in the Baptist Church. He is married and has had three children, two daughters living. Two relatives, Cassidy Chenoweth (father), 1869, was a graduate of Rush and his son, William Chenoweth, attended a course.

**'72. Cyrus Monroe Easton**, Hebron, Nebraska, entered Rush in 1871. He was prepared at Western Reserve Seminary, Farmington, Ohio, and at the Illinois Wesleyan University, Bloomington, Illinois. He has practiced at Gardener, Illinois, 1874-84. He took post-graduate course at Rush in the spring of 1882. Is a member of the Thayer County and Nebraska State Medical Societies. He was in the Civil War, Company F, One Hundred and Fortieth Illinois Volunteer Infantry and is a member of the G. A. R.. He is married and has three children, all of whom are living.

**'72. Raymond Lockwood Leonard**, Chicago, Illinois, entered college in 1866. Passed his examination for degree of M. D. February 3, 1869, at age of 18, received diploma January 17, 1872, being then of age. Was superintendent of Rush Free Dispensary 1870-71. Was prepared at Dyrenforth College, Chicago. Belongs to the following societies: Chicago Medical, Illinois State Medical, and A. M. A. He is not married. He has had at Rush William Parsons, Benjamin Franklin Leonard, a nephew, Charles O. Strickland, '88, nephew by marriage, Raymond J. Nate, '92, a nephew. He is a member of the Methodist Church. He also is a member of the Sons of Veterans. Was Colonel of the First Regiment, Sons of Veterans Guards, '93 to '94. Is a 32d degree Mason, Knight Templar, and Shriner. Has been Master of Lodge and Council, Commander of St. Bernard Commandery, Knights Templars, and Grand Master of Illinois Grand Council, R. & S. M.; also member of Illinois Veteran Mason's Association.

**'72. George F. Merritt**, St. Peter, Minn., entered Rush in 1868. Was 1882 took post-graduate work, New York Polyclinic. He has done post-cities: Minnesota Valley, Minnesota State, and the A. M. A. He is married and has had five children, four of whom are living.

**'72. George F. Merritt**, St. Peter, Minn., entered Rush in 1868. Was educated at the Burlington College, Iowa. He does a general practice. In 1882 took post-graduate work, New York Polyclinic. He has done post-graduate work in Rochester, Minn. He is a member of the following Societies: Minnesota Valley, Minnesota State, and the A. M. A. He is married and has had five children, four of whom are living.

**72. Eugene Jackson Smith**, Harlan, Iowa, entered Rush in 1870. Was prepared at Western and Cornell Colleges, Iowa. He does a general practice and since graduation has practiced at Dexter, Iowa, until 1880 and then at his present location. He has done post-graduate work in Chicago in '83 and '95. He is a member of the following Medical Societies: Shelby County, Botna Valley, Iowa State, Missouri Valley and A. M. A. He is married and has had six children, five of whom are living. Two uncles, John T. and Jesse H. and a cousin, John T. Walker, '73, have been at Rush. He belongs to the Masonic Order.

**73. Franklin Bedford**, Maple Park, Illinois, entered Rush in 1859. He has practiced in Rochelle and Shabbona, Illinois. He enlisted 1861 in Company C, Twelfth Regiment, Illinois, Volunteer Cavalry. He was appointed Hospital Steward 1862 and served until 1865. During part of this time he acted as Assistant Surgeon and was captured and paroled. During the periods of parole in 1863 while he was in Chicago, he attended a few lectures at Rush. He served until the end of the war after his exchange. He has two children, a boy and a girl.

**73. John Grass**, Trinidad, Colorado, entered Rush in 18770. He was Surgeon General of the State Troops of Kansas, 1880; Local Surgeon for Colorado Fuel and Iron Company, Trinidad, from 1883 to 1897; Surgeon for the Trinidad Coal and Cokeing Co. from 1882 to 1898, Chief Surgeon for Victor Fuel Co. 1890 to 1909; Local Surgeon for A. T. & S. F. R'y. from 1883 to present time; Consulting Surgeon on Colorado and Southern R'y. from 1896 to present time. He belongs to the Las Animas County and Colorado State Medical Societies and the A. M. A. During the Civil War he was a Private in Company I, Fifth Illinois Cavalry, and was mustered out before he was 19 years old. In 1898 he was a delegate to the National Republican convention. In 1896 he was Chairman of the Colorado Republican State Convention. He is married and has had four children, of whom three daughters are living.

**73. C. H. Hamilton**, Dubuque, Iowa, entered Rush in 1871. He was prepared at the Iowa State University. He has practiced at Garnville, Monona and Dubuque, Iowa. He has been a member of the United States Board of Pension Examiners and a member of the Board of Commissions on Insanity. He is a member of the Dubuque County, North Iowa and Iowa State Medical Societies, and of the A. M. A. He is married and has had five children, three of whom are living. He is a distant relative of the late John B. Hamilton, '69, an alumnus and formerly Professor of Surgery at Rush Medical College.

**73. Frederick Andrew Hess**, Chicago, Illinois, entered Rush in 1869. He was prepared in a private academy in Bergen, Norway. He is doing general practice and belongs to the Chicago Medical and the Scandinavian Medical Societies and the A. M. A. He has the degree of Ph. D. from Montezuma University, 1899. He is a member of the M. E. Church. He is married and has two children.

**73. Geo. B. Little**, Burlington, Iowa, entered Rush in 1871. He was prepared at the Kewanee High School, and the Kansas State Agricultural College. He was County Physician from 1874 to 1878. He is President of the Board of United States Pension Examiners. He has done post-graduate work in Chicago at Rush, Polyclinic and Augustana Hospital. He is President of the Burlington Hospital Training School for Nurses, and a member of the staff of St. Francis Hospital. He is a member of the Des Moines County, Iowa State and Southeastern Iowa Medical Societies and of A. M. A. He has written numerous articles for publication. He is married and has four children. Four of his relatives, C. F. Little, '63, D. B. Colby, '84, C. F. Perkins, '86, and P. J. Little, 1900, have taken work at Rush. He is a trustee of the Congregational Church and Society. He was a member of the School Board, Second School District of Washington

**73. C. L. Myers**, Covington, Indiana, entered Rush in 1871. Was prepared at Russellville Academy, and Indiana State University. He practiced at Wallace '73 to '76; Alamo, '76 to '81; Hillsboro, Indiana, '81 to '83. He has taken post-graduate work in general medicine and surgery, Chicago Polyclinic, 1893. He was coroner of Fountain County, Indiana, '96 to '98. He has been Secretary of the County Board of Health from 1903 to the present. He is a member of the Fountain County Medical Society. He is a widower and has one daughter. Two second cousins have been at Rush—Noah D. Myers and Ephriam M. Fine. He is a member of the M. E. Church.

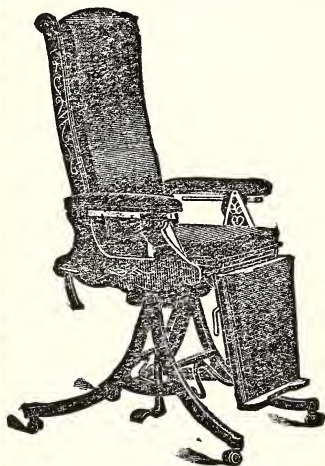
**73. Godfrey Frederick Shimonek**, Milwaukee, Wisconsin, entered Rush in 1871. He practiced at Beaverdam, Wisconsin, from '75 to '78, and since then in Milwaukee. He has taken post-graduate work at Bellevue Hospital, '74, and Prague and Vienna in '81. He is a member of the Milwaukee, Milwaukee County, Fox River Valley, and Wisconsin State Medical Societies and the A. M. A. He has written nineteen articles, mostly on surgical and gynecological subjects. He is married and has three children. A brother, Anton Shimonek, attended Rush, 1877.

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STUDENT SECRETARY  
OF  
**RUSH MEDICAL COLLEGE.**  
**The Bulletin**

OF THE ALUMNI OF RUSH MEDICAL COLLEGE

Volume III

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REMEMBER THE FOLLOWING DATES.

Special Clinics for Rush Alumni, two weeks, June 10-20, 1907.

Theater Party, June 10, 1907.

Alumni Dinner and Business Meeting, Class Reunions, June 11,  
1907.

Commencement Exercises, June 12, 1907.

Faculty and Alumni Banquet, June 12, 1907.



## COMMENCEMENT EXERCISES, WINTER QUARTER.

The Commencement Exercises of the winter quarter were held Thursday, March 21, 1907, at 7:30 o'clock in the upper amphitheater. Nine candidates received the degree *Medicinæ Doctor*, as follows:

Benjamin Henton Brown,  
Delos Edward Cornwall,  
Fred E. Ewing,  
Herman Charles Groman,  
Omar Ray Gullion,

Edward James Lewis,  
Frederick Adolph Speik,  
Roy Eccles Thomas,  
Joseph Bernard Winnick.

The commencement address was delivered by Dr. Ernest L. McEwen of the faculty. The title of his address was "The Interpretation of the Leprosy of the Bible." In another part of THE BULLETIN we publish an abstract of his paper. The full paper he hopes to publish at some future date.

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THE INTERPRETATION OF THE LEPROSY OF THE  
BIBLE.\*

ERNEST L. McEWEN, M.D.

ABSTRACT.

There are numerous references to leprosy in the Bible, especially in the Old Testament. A number of these are simple narratives, telling of the miraculous onset or termination of the disease, as the story of the leprosy of Moses, of Miriam, of Naaman, and of Gehazi, and the accounts in the New Testament of the cleansing of the lepers by Jesus.

The main body of references is to be found in the Book of Leviticus, where the Jewish law relating to leprosy is detailed. The popular interpretation put upon these various references is about as follows: The leprosy mentioned in the Bible was the same as the leprosy of to-day; it was an extremely contagious and altogether terrible disease, because its victims were outcasts; it was often a means of Jehovah for the punishment of the wicked, and it was made a subject of special mention by Jesus in his instructions to the Apostles as to their missionary duties. The purpose of this paper is to show wherein this interpretation is faulty.

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\* The complete article will be published later.

Egypt has been considered the cradle of leprosy. Manetho, an Egyptian historian, writing in Greek, about 300 B. C., states that at the time of the great exodus there were 90,000 Israelites afflicted with *lepra* in Egypt. It was introduced into Italy by the armies of the Romans, became widespread in Europe during the middle ages, but diminished after the sixteenth century. *Lepra* is now synonymous with *leprosy*, but this fixation of the meaning of the former term has occurred within the last fifty years. The term *lepra* was used by Hippocrates, who lived in the fifth century B. C., to designate skin conditions characterized by scaliness. In the second century, B. C., true leprosy was described under the name *elephantiasis*. It is probable that at the beginning of the Christian era *lepra graecorum* and *elephantiasis graecorum* were conceived as separate and distinct conditions. It is also probable that in the Greek version of the Old Testament, made about 250 B. C., and called the Septuagint, the word *lepra*, therein given as the equivalent of the Hebrew *zaraath*, carried with it the pathological significance given to it by Hippocrates, -i. e., a condition of scaliness of the skin. In the early centuries of the Christian era *lepra* was used without intelligent discrimination, and covered a large number of skin diseases, among which true leprosy was undoubtedly included. At the time the authorized version was made the greatest confusion obtained as to the true meaning of *lepra* and *leprosy*.

The association of whiteness with leprosy, which so commonly occurs in the Scriptures, is easily explicable if we consider the condition so named as characterized by scaliness. Scale formation is always associated with some degree of whiteness. In the accounts of the leprosy of Moses (Exodus, IV, 6-7), and of Miriam (Numb., XII), the "white as snow" feature is found; but we cannot say more with respect to these instances than that the conditions described probably were such as would place them in the category of Hippocratic *lepra*; that is, they were white scaling dermatoses.

The leprosy of Naaman (II Kings, V), was regarded by Hebra as an instance of scabies, cured by bathing in the sulphurous waters of Jordan, and carried over to Gehazi through the medium of infected clothing.

In the thirteenth and fourteenth chapters of Leviticus the law of so-called leprosy is set forth. In this law four points are made prominent: The recognition of leprosy, the rendition of the verdi~

unclean, the separation of the victim from among the people, and the later purification of the leper. Leprosy of a garment and of a house is described. False interpretation of these chapters is largely responsible for the widespread belief in the awfulness of leprosy, and in its profound contagiousness. "Unclean" has been accepted as meaning "contagious," and the idea of contagion is held to be supported by the fact that the leper was obliged to leave camp immediately.

Analysis of chapter thirteen shows that it is not scientific in fact or by intention. It is futile to attempt to discover from the context precisely what diseases were included in the several descriptions. The purpose cannot be to define leprosy; at best, one may say that all the conditions mentioned are inflammations, and these comprise at least two-thirds of all diseases of the skin. Viewed from the standpoint of clinical differentiation the chapter is singularly devoid of significant facts. The recorder stays within a relatively narrow circle in his descriptions; the terms used are generic rather than specific; and there is almost complete absence of modifying factors which are so essential in separating one disease from another. In a word, the chapter, viewed medically, presents simply a grouping of indefinite descriptions, applicable in a meager degree to many forms of skin disease of the inflammatory type, including leprosy, and characteristic of none.

The purpose of the law of leprosy is given in the last verse of chapter fourteen: "To teach when it is unclean and when it is clean."

Regarding the significance of "uncleanness" analysis will show that, while the hygienic effect of the Mosaic law cannot be successfully disputed, a like statement as to the intent of the law is not warranted. The sanitary features of the law must be regarded as accidental and not the result of plan, and the explanation of the clean and unclean must be sought in the religious conceptions of the times, and not in the hypothesis that Moses was versed in public sanitation.

The entire system of the clean and unclean among the Hebrews is explicable if we regard it as a manifestation of the *law of taboo*. As a principle *taboo* has been and is universal in distribution. It affirms that certain things may not be touched by man without danger to him from the contact. Things taboo may be placed in two categories, things holy and things unclean. The former appertain



to the gods and are therefore too sacred for the touch of man. The latter have within themselves a malign influence which passes to man by contact. Things taboo are infectious; that is, whatever is touched by them becomes tabooed, and thereby capable of conveying the infection further. Folk-lore of all peoples in all times abounds with instances illustrating the law of taboo, and the law of leprosy among the Israelites must be regarded as an expression of the same primitive conception.

The thirteenth chapter of Leviticus, therefore, instead of being an account of true leprosy, is nothing more than a description of certain abnormal skin conditions, which to the Israelites were unclean, not because they were contagious, or filthy, or hideous, but because in the conception of that people they possessed certain supernatural qualities which rendered them harmful and which demanded ceremonial purification for removal.

To summarize:

1. The term leprosy in the Bible covered a large number of abnormal skin conditions, for the most part inflammatory, among which number true leprosy may have been found.

2. It is probable that in many instances the leprous lesion was a white scaling dermatosis, corresponding to the *lepra* of Hippocrates.

3. The leprosy of the Bible cannot be considered as having been ever and always contagious. The uncleanness associated with it had a ceremonial and religious significance only, the entire system of the clean and the unclean among the Israelites being referable ultimately to a certain primitive religious idea, universally present among men, known technically as the principle of taboo.

4. Lepers were outcasts, not because of their disease, but because of their uncleanness; that is, not for sanitary reasons, but for religious or ceremonial reasons. The popular dread of leprosy, based as it is so largely upon the contemplation of the unhappy fate of the so-called leper of the Bible, is therefore illogical, and wholly without just cause. The awfulness of biblical leprosy is an inference only, and one, too, which is founded, not on scientific fact, but on an ancient, religio-psychological assumption of crudely civilized man.

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**DO YOU KNOW THAT RUSH COLLEGE HAS A STANDARD OF SCHOLARSHIP SECOND TO NONE?**

**DO YOU APPRECIATE THE LOSS OF STUDENTS THAT SUCH HIGH STANDARD INVOLVES IN ITS INITIAL YEARS?**

## INTERNES AT COOK COUNTY HOSPITAL, 1907.

For the first time, this year no "schools" are recognized in the appointment of internes at the Cook County Hospital. About ninety-six took the examination, almost one-half were from the "irregular schools," twenty-four were from Rush. Rush is very proud of the success of her "boys." The first five places means a great achievement. The Alumni should note the regularity with which Rush students are capturing the best places.

## REGULAR.

1. Beifeld, A. F., Rush.
2. Jones, R. Y., Rush.
3. Lewis, E. J., Rush.
4. David, V. C., Rush.
5. Cornwall, D. E., Rush.
6. Greissenger, J. D., Northwestern.
7. Wilson, Betty A., P. & S.
8. Smith, H. J., P. & S.
9. Eustice, A. R., Northwestern.
10. Wellington, A. H., Rush.
11. Daugherty, W. B., P. & S.
12. Gurberson, J. H., Northwestern.
13. Stevenson, R. G., Northwestern.
14. Ranson, S. W., Rush.
15. Montgomery, A. H., Rush.
16. Seipel, Clara, P. & S.
17. Handleman, J. E., Northwestern.
18. Oppenheim, J. J., Northwestern.
19. Divan, S. G., Northwestern.
20. Mellinger, H. V., Rush.
21. Kingsbury, H. B., P. & S.
22. Kauffman, J. R., Rush.
23. Speik, F. A., Rush.
24. Gowan, C. H., Rush.
25. Jackson, H., Rush.
26. Wilkowsky, S. J., Northwestern.
27. Koltinsky, I. S., Northwestern.
28. Holberg, E. A., Northwestern.
29. Phillips, M. C., P. & S.
30. Kirby, A. D., Northwestern.

## ALTERNATES.

31. Rogers, E. B., Northwestern.
32. Hoy, C. L., Rush.
33. Mitchell, E. C., Northwestern.
34. Groman, H. C., Rush.
35. ————, Northwestern.
36. Meents, W. H., Rush.

## ALUMNI FELLOWSHIP FUND.

When the character of the work done by our two Fellows is considered, and we hear such favorable comments upon it from Alumni and others, we feel very sorry that at present no Alumni Fellow is at work. It was hoped to be able to pay the Fellow from the money received by dues, but this has been impossible after printing our BULLETIN. It therefore has again become necessary to raise the Fellowship funds by separate effort.

The Fellowship committee has again undertaken to secure funds in a similar manner to that employed two years ago. When we remember the labor involved in getting \$500 in small sums, we will surely all be glad to respond promptly, and so spare the committee as much labor as possible.

The committee is also securing pledges for this fund for the two following years, conditioned upon securing pledges for \$500. They desire it made plain that the object of the pledge cards is not to secure large pledges, but only such as correspond to the amount you give now. Let us have a large number of contributors to the Fellowship fund. This is a good way to show interest in the college and to demonstrate Rush ideals.

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**WILL YOU SHOW YOUR LOYALTY BY KEEPING IN TOUCH WITH  
THE ALUMNI ASSOCIATION AND RESPOND TO THIS APPEAL?**

**WE ASK NO MONEY FOR THE COLLEGE.**

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**THE STATE MEDICAL SOCIETIES—MEETINGS OF THE  
RUSH ALUMNI.**

Herewith is given a list of the state medical societies, where will be held also meetings of the Rush Alumni. Members of the Faculty will be present at most of these meetings if the secretaries will write to Dr. Haines, who can arrange to send some one to the gatherings. Some have already written and members of the Faculty are going to attend.

Colorado State Medical Society, Sept. 17, 1907.

Illinois State Medical Society, Rockford, May 21-23, 1907.



Indiana State Medical Association, Indianapolis, May 22-24, 1907.

Iowa State Medical Society, Cedar Rapids, May 15-17, 1907.

Kansas Medical Society, Kansas City, May 8-10, 1907.

Michigan State Medical Society, Saginaw, May 15-16, 1907.

Minnesota State Medical Association, Duluth, Aug. 21, 1907.

Missouri State Medical Association, Jefferson City, May 14-16, 1907.

Nebraska State Medical Association, Omaha, May 7-9, 1907.

Ohio State Medical Association, Cedar Point, Aug. 28, 1907.

Wisconsin State Medical Society, Superior, Aug. 20-22, 1907.

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**DO YOU RECALL THAT RUSH HAS NO INCOME FROM THE  
UNIVERSITY OF CHICAGO?**

**DO YOU REALIZE THAT THE DECISION TO BE THE BEST IN-  
VOLVED THE COURAGE TO FACE A DEFICIT?**

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### CLASS REUNIONS AT COMMENCEMENT.

The following classes are due for reunion at this commencement: '52, '57, '62, '67, '72, '77, '82, '87, '92, '97, '02. A committee has already met to consider getting out the greatest number possible to the gathering. Members of these classes take notice and prepare to return at this commencement to see what Rush is doing and how she has advanced; also to renew your acquaintance with old-time classmates. You will be expected at the Alumni meeting Tuesday evening, June 11, where tables will be provided for the various classes.

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**ARE YOU SURPRISED THAT THE FACULTY IS PAYING THE  
EXPENSES NOT COVERED BY FEES OUT OF THE POCKETS OF ITS  
INDIVIDUAL MEMBERS?**

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### AN APOLOGY.

An apology is due to Dr. Billings, to the College, and to the Alumni for the errors appearing in Dr. Billings' excellent article in the last number of THE BULLETIN. Lack of a second proof and the work of a printer inexperienced in medical terms made this excellent article appear ridiculous in places.

## ABSTRACTS OF LETTERS FROM THE ALUMNI.

## SHORT BIOGRAPHICAL SKETCHES.

'73. **G. D. Swaine**, Cleveland, Ohio, entered Rush 1871. Was prepared at High School. He has practiced in Minnesota, Dakota, and Detroit, Mich. He has done post-graduate in the Chicago Polyclinic. He makes a specialty of the drug habit and alcoholism. He retired from practice two years ago and is now a financial manager of a syndicate. He has written a number of articles for medical journals. He is a Mason, a Royal Arch Mason, and a Knight Templar. He was Mayor of Wahpeton, Dak., for three successive terms. He is married and has no children. A cousin of his, Theo. Crosse, of Sun-Prairie, Wis., is an Alumnus of Rush, 1879.

'73. **John S. Thompson**, Palestine, Ill., entered Rush in 1870. He has practiced at Bruceville, Ind., 1881-83. He comes from a family of physicians. He is a member of the Esculapian, Crawford County, Illinois State, and Tri-State Medical societies. He is a Mason and belongs to the Presbyterian Church. He is married and has had three children, two of whom are living. J. S. Thompson, a brother, attended Rush in 1851. M. V. Witherspoon, 1866, a brother-in-law, is a graduate. Four or five other relatives have also been students at Rush.

'73. **J. Godfrey Walker**, St. Paul, Minn., entered Rush in 1871, on advice of his preceptor, Prof. J. Adams Allen. He was prepared at the Douglas University, Chicago, Ill. He has practiced in Chicago, 1873-80; Rochester, N. Y., 1880-82. He is still in active practice and makes a specialty of the eye and ear. He is not married. A brother, Charles E. Walker, 1885, has been at Rush.

'74. **Ezra T. Goble**, Earlville, Ill., entered Rush in 1872. His preparatory training was received at the Illinois State Normal, Normal, Ill. He is still in active practice. He is a member of the following medical societies: American Medical, American Association of Railway Surgeons, Illinois State, North Central Illinois Medical Society, past president La Salle County. He was Mayor for two terms and Alderman one term. He is president of the Earlville National Bank. He is married and has three children, two girls and one boy.

'74. **Gershom Hyde Hill**, Des Moines, Iowa, entered Rush in 1873. He was prepared at Iowa College, Grinnell, Iowa, 1871, from which institution he has the degrees A.B. and A.M. He was first assistant physician at the Hospital for the Insane at Independence, Iowa, for seven years and superintendent for twenty-one years. He is still in active practice and has been in Des Moines five years practicing his specialty as an alienist. He conducts a private hospital called, "The Retreat." He has been lecturer for fifteen years in the State University of Iowa, College of Medicine, also in Drake University. He has taken post-graduate work in New York in 1878, Boston 1890. He is a member of the following medical societies: Polk County, Des Moines Pathological, Austin Flint, Cedar Valley, Iowa State, American Medical, Medico-Psychological, and the American Academy of Medicine. During the Civil War he was a private in Co. B, 46th Iowa Infantry Volunteers. He is not a secret society man, but is a member of the Des Moines Golf and Country Club, Prairie Club (literary), G. A. R. (Crocker Post), S. A. R. (Ben Franklin Chapter), Grant Club, and the Commercial Club. He is a deacon in the Plymouth Congregational Church, a trustee of Iowa College, Grinnell, Iowa. He is married and has one child.

'74. **Herbert Marcus McKenzie**, Elwood, Ia., entered Rush in 1873. He was prepared in Professor Bangs' Select School at Princeton, Ill. He has practiced since graduation at Elwood, Ia. He is a member of the American Medical Association. Dr. E. L. Dow, 1887, of Rock Falls, and a graduate of Rush, is his cousin. He is married and has six children.

'74. **W. H. Morgan**, Middletown, Ind., entered Rush in 1869. He practiced in Chicago from 1874 to 1896, and in Alabama from 1897 to 1899, and in Gilman, Ind., until January, 1907, when he retired on account of ill health. He has taken post-graduate work in bacteriology at Rush in 1895, and in nose and throat at the Chicago Eye, Ear, Nose and Throat College in 1900. He was attending physician at the Central Free Dispensary (Rush), 1880 to 1893. He was Coroner for Henry County, Ind., in 1901. He belongs to the Madison County and Indiana State Medical Societies. He has traveled over the larger portion of fifteen states and two territories. He served three years in the Civil War. He is married and has had three children, two of whom are living.

'74. **Franklin LaFayette Rownd**, Dighton, Kan., entered Rush in 1873. He is not now in active practice, but has been in the drug business for the last seven years. He has practiced in the following towns in Iowa: Allerton, Richmond and Kalona. He is not a member of any medical society at present. He is a member of the following orders: A. F. and A. M., I. O. O. F., K. of P., M. W. A., I. O. U. W., and the Eastern Star. He is married and has had seven children, four of whom are living.

'74. **E. B. Shumway**, Chicago, Ill., entered Rush in 1872. He was prepared at West River Academy, Londonderry, Vt., Black River Academy, Ludlow, Vt., and Chamberlin Institute and Abby, Randolph, N. Y. He is still in active practice. He has practiced since graduation at Peotone, Ill., from 1875 to 1890, one and one-half years in Wichita, Kas., and two and one-half years in Fort Worth, Texas. He is a member of the Chicago Medical Society. He was an interne at Cook County Hospital. He was a member of the Illinois Legislature from 1880 to 1882, and then a member of the Illinois Senate from 1882 to 1886. He is a widower and had a son and a daughter, both of whom died young.

'74. **D. M. B. Thom. Mardin**, Turkey-in-Asia, entered Rush in 1872. He is in general practice. He practiced for six months at Owatonna, Minn. He has received the Decoration of the Fourth Magedia from the Sultan of Turkey for medical work done in the cholera epidemic in 1895. He is a member and deacon emeritus of the First Congregational Church, Owatonna, Minn. He is married and has had four children, three of whom are living.

'74. **Arthur L. Wright**, Carroll, Iowa, entered Rush in the fall of 1870. He received his preliminary education in the public schools at Madison, Wis., and the University of Wisconsin. He is in active practice at Carroll, Ia., where he has been since graduating in 1874. He is a representative general practitioner, but does a large amount of surgery at his thirty-bed hospital, established fifteen years ago. Has done postgraduate work during the winter of 1880 and 1881 at Rush, at Policlinic, Chicago, in fall of 1892, several months abroad in 1895, most of time spent at Hamburg, Germany, winter of 1889 at Post-Graduate, New York. In addition to the above he spends about one month of each year visiting the large clinics of the country, Boston, New York, Philadelphia, St. Louis, Chicago, New Orleans, etc. He is a charter member of the Carroll County Society, Iowa State, American Medical Association, of which he is one of the trustees at the present time, Western Surgical Association, American Association of Railway



Surgeons, and one of its Executive Board, National Military Surgeons. He has written numerous articles, mostly on surgical subjects, always ready to contribute his mite to the success of whatever society he belonged. He was connected with Iowa National Guard for fifteen years, serving as Surgeon Major for five years, five years Major in the field, and then returned to the medical department as Surgeon Major. He served on the examining board during the Spanish-American War that reorganized the medical department of the troops that went to the front. He is married and has one son who is now taking the six year course in Medicine at the University of Chicago. He had a brother, Charles Wright, who is dead, who graduated from Rush with the class of 1887. At the present time he is president of the Iowa Rush Alumni Association.

**'75. Walter F. Reynolds**, York, Neb., entered Rush in 1872. He was prepared at Hiram College, Hiram, Ohio. He is still in active practice. He practiced from 1873 to 1888 at Summer Hill, Ill. He took a post-graduate course at the Chicago Polyclinic in 1888. He is a member of the following medical societies, York City, York County, Nebraska State, and the American Medical Association. He is a member of the Congregational Church. He is married and has two daughters. He had one brother who attended Rush, Emery E. Reynolds, 1878.

**'75. Gustavus Frank Schreiber**, Chicago Heights, Ill., entered Rush in 1871. He took his preparatory course at Dyrefurth College. He is still in active practice. He practiced at West Brooklyn, Ill., from 1875 to 1890. and at Maywood, Ill., from 1890 to 1900. He took a post-graduate course in Kleb's Biological Laboratory. He is a member of the North Central Medical Association and the Illinois State Medical Society. He has been City Physician and Commissioner of Health from 1900 to 1907. He is married and has four children, three boys and one girl.

**'75. Alexander Douglas Taylor**, Springfield, Ill., entered Rush in 1872. He is still in active practice. He makes a specialty of diseases of the chest, nose and throat. He has done post-graduate work as follows: New York Post-Graduate School (general medicine), 1888; Chicago Polyclinic (bacteriology and eye and ear), 1893; Chicago Polyclinic (general medicine and nose and throat), 1896; Chicago Post-Graduate (general medicine), 1900; Vienna, Austria (chest, nose and throat), 1903-4. He belongs to the following medical societies: Sangamon County, Illinois State, American Association of Life Insurance Examiners, and the American Medical Association. He is married and has one child, Geo. I. Taylor. L. C. Taylor, a cousin, attended one term at Rush; I. H. Taylor, 1871, and J. L. Taylor, 1877, cousins, are graduates of Rush and practicing at Springfield, Ill.

**'75. Arthur Le Roy Wheeler**, Mason City, Ia., entered Rush in 1873. He was prepared at the University of Wisconsin. He practiced at Spring Green, Wis., from 1875 to 1879. He is not in active practice now. He is an Odd Fellow and a Mason and a member of the Episcopal Church. He was Assistant Surgeon and Surgeon in the Iowa National Guard from 1882 to 1895. He is married and has had three children, two of whom are living.

**'75. Geo. Dutton Ladd**, Milwaukee, Wis., entered Rush in 1873. He was prepared at the Milwaukee Academy. He is still in active practice and makes a specialty of surgery. He has done post-graduate work as follows: New York, 1896; Paris and London, 1898; Philadelphia, 1900; New York, 1902. He has been surgeon to St. Mary's Hospital from 1875 to date. He was surgeon of the C. M. and St. P. Ry. from 1875 to 1906.

He was a member of the U. S. Examining Board for Wisconsin in 1898 for the Spanish American War. He was president of the Wisconsin State Medical Society in 1891. He is a member of the following medical societies: Milwaukee County, Milwaukee (City), Wisconsin State, and the American Medical Association. He is a widower and has had two children, one of whom is living.

'75. **James Johnston McFadden**, Buffalo, N. Y., entered Rush in 1874. He was prepared at Bellevue, New York City. He practiced in Olcott, N. Y., from 1875 to 1893. He is still in active practice. Henry D. C. Van Buren, 1887, a relative of his, was graduated from Rush. He is married and has one child.

'75. **James Albert Nowlen**, Morrison, Ill., entered Rush in 1873. He has practiced at his present location since graduation. He is still in active general practice. He has taken a postgraduate course at the University of New York, where he was graduated in 1883. He was coroner of Whiteside County 1878 to 1880. County physician 1887 to 1903. He was at one time President of the Whiteside County Medical Society. He is a member of the following medical societies: Whiteside County, North Central Illinois, Illinois State and the A. M. A. He was a member of the Pension Board from 1880 to 1900. He was a member of the Board of Education and Alderman to 1905. He is now Mayor of the City of Morrison. He affiliates with the Presbyterian Church, and is a Republican. He is married and has five children, all of whom are living.

'75. **George W. Farrow**, East Lynne, Mo., entered Rush in 1867. He is still engaged in active general practice. He has done postgraduate work in the Electro-Therapeutics College, Lima, Ohio, and refraction work in the Golden Cross College and Clinic, Chicago, in 1903. He is a member of the following medical societies: Cass County (vice-president), Tri-County, Missouri State and the A. M. A. He is a member of the M. E. Church. He is an A. F. & A. M. (Knight Templar). He is married and has five children. One son, Fred Rea, was named after Prof. H. L. Rea.

'75. **Luman M. Giffin**, Boulder, Colo., entered Rush in 1874, from the medical department of the University of Vermont. He was prepared at the Black River Academy, Ludlow, Vt. He is doing a general practice largely, but more surgery each year. He took postgraduate work in New York Polyclinic in 1900. He was professor of Anatomy and Physiology from 1885 to 1896, Dean of the Medical Department, 1898, and has been Professor of Surgery from 1900 to the present time of the Department of Medicine of the University of Colorado. He is a member of the following medical societies: Boulder County, Colorado State and the A. M. A. He is a member of the University of Colorado Scientific Society. He is President of the Colorado Chapter Sigma X. He is married and has had seven children, five of whom are living.

'75. **Jesse L. Hill**, Lowell, Ind., entered Rush in 1872. He was prepared at the Lowell High School, and had taught two years in the public school of the county before studying medicine. He is in active practice. He practiced in South Chicago from 1875 to 1876, and since then at his present location. He took postgraduate work at Rush in 1888. He is a member of the following medical societies: Kankakee Valley and Lake County, Indiana. He is a Free Mason, and has been secretary of the Old Settlers and Historical Society for the past fifteen years. He is married and has four children, one of whom is the wife of Dr. T. F. Clifford of ElReno, Okla.

'75. **William T. Adams**, Elgin, Minn., entered Rush in 1872. He

attended college for one year at Northfield, Minn., 1870-71. He is still in active general practice, and has practiced since graduation at his present location, except for a few months at Plainview, Minn. He did postgraduate work at the New York Polyclinic in 1892. Has a small private hospital and does some capital operations. He belongs to the following medical societies: Minnesota State, Southern Minnesota, Wabasha County and Omsted County, and the A. M. A. He has written articles for society meetings, usually on surgical subjects. He is a member of the Congregational Church. He is married and has had three children; two sons are living.

'75. **John Binnie**, Poynette, Wis., entered Rush in 1868. He is still in active general practice. He is a member of the following medical societies: Columbia County, Wisconsin Central, Wisconsin State, Associated Railway Surgeons and the A. M. A. He has written articles on obstetrical subjects and pediatrics. He is an Odd Fellow and a Mason. He is married and has three children.

'75. **Marshall Cassingham**, Wilmington, Ill., entered Rush in 1870. He was prepared at the Wesleyan University, Bloomington, Illinois. He is doing a general practice, and has been located since graduation as follows: Roberts, Ill., 1875-1892; Kankakee to 1895, Gardner to 1900, and since at his present location. He did postgraduate work at Rush in 1892. He is a member of the following medical societies: Kankakee County, Central Illinois and Illinois State. He was first lieutenant Company A, One Hundred and Fifty-sixth Illinois Volunteer Infantry during the Civil War. He is a member of the M. E. Church. He is married and has four children, all living. A brother-in-law, W. H. Watson, 75, of Chebanse, is a graduate of Rush.

'76. **Daniel Hampton Bowen**, Waukon, Iowa, entered Rush in 1873. He is in active general practice, and has been at the same location, with the exception of four years at Rossville, Iowa. He had a preliminary high school education. He is local surgeon for the Minneapolis & St. Paul Railway. He was assistant surgeon in the Iowa National Guard for seven years. He was president of the Rush Alumni Association 1904-1905. He is a member of the following medical societies: Allamakee County, North Iowa, Iowa State and the A. M. A. He was representative in the Iowa State Legislature for three terms, 1895 to 1900, and a speaker of the House of Representatives 1899 to 1900. He is married and has two children, both of whom are living. Lee B. Rowe, a relative of his, was at Rush.

'76. **Frank B. Florentine**, Saginaw, Mich., entered Rush in 1873. He was prepared at Hicks High School, Kankakee, Ill, St. Viateur College, Bourbonnais, Ill., and Eureka College, Eureka, Ill. He is still in active practice and makes a specialty of surgery and gynecology. He has taken two years postgraduate work in Paris. He is a member of the following medical societies: Saginaw County, Michigan State and the A. M. A. He has written numerous articles and made translations of articles from the French. At the age of 15 he enlisted in Company H, Fifty-eighth Regiment, Illinois Volunteer Infantry, and served one year. He is married and has two children, one of whom is a doctor, namely, Edward A. Florentine, also of Saginaw, Mich. A nephew, Arthur L. Gagnon, 1900, is a graduate of Rush and is located at Kankakee, Ill.

'76. **James Monroe Harman**, Fairport, DeKalb County, Mo., entered Rush in 1873. He has not been in active practice since 1901. He practiced after graduation at Alla Vista, Mo., up to 1884. He took a postgraduate course at the Missouri Medical College, St. Louis, Mo., in 1880. He is a

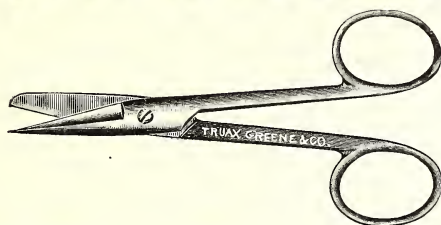
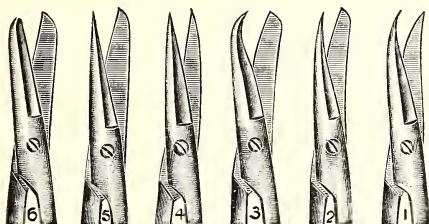


member of the Baptist Church, and has been Sunday School superintendent for twenty-five years. He belongs to M. W. A. and I. O. O. F. He is married and has three children, two girls and a boy.

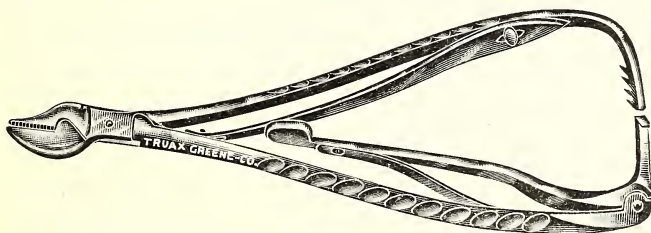
'76. **Johann H. William Meyer**, LaPorte, Ind., entered Rush in 1874. He was prepared in Germany, "Selecta School." He is in active general practice. He took postgraduate work in 1877 in Berlin (general medicine), Heidelberg, 1887, Vienna, 1888. He is a member of the following medical societies: La Porte County, Cook County Hospital Alumni Association, American Association of Railway Surgeons, American Pension Examining Surgeons; American Association of Life Insurance Examiners and the A. M. A. He is married and has had seven children. One son, Warren, is now a student at Rush.

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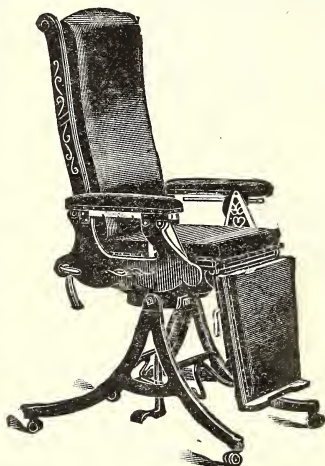
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# The Bulletin

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### *A Meeting of Rush Medical College Alumni at Atlantic City, N. J., June 4.*

On June 4, Tuesday evening, there will be a meeting of the Alumni of Rush. Dr. Ingals will be at the Hotel Strand on Monday and will see that the time and place are properly announced and arrangements completed. The Committee on Entertainments at Atlantic City has planned a College Alumni Night. Many colleges will have gatherings that night. Let ours not be the smallest.

COMMENCEMENT ANNOUNCEMENTS IN THIS NUMBER.



## GENITO-URINARY CLINIC.

WILLIAM T. BELFIELD, M.D.

CASE 1.—*Incontinence (dribbling) of Urine.* Man, 40 years old, is suffering from involuntary escape of urine by day as well as by night. The trouble began eight months ago and occurred at first only at night, but later appeared by day also. His clothing is wet and, of course, malodorous.

Now what is the matter with his urinary apparatus? Do not say "paralysis of the sphincter muscle," etc., for that is begging the question. Incontinence of urine in the adult—that is, the habitual escape of urine from the bladder without the patient's knowledge or consent—practically always results from one of two conditions: (1) spinal-cord disease and (2) overdistention of the bladder from an obstruction to the exit of urine, usually by a tight stricture or hypertrophied prostate. As this man is not old enough to have prostatic hypertrophy, we shall doubtless find that he has either *tabes* or a tight stricture, or both. Percussion above the symphysis elicits no flatness, so that his bladder is not overdistended, and we may assume, even before we pass a sound, that his dribbling does not proceed from a tight stricture.

We now test his patellar tendon reflexes; they are absent in both legs. When he stands with feet in contact and closes his eyes, he sways unsteadily; his pupils react to light, but not for accommodation. He has, then, locomotor ataxia. A No. 27 French sound passes easily into the bladder, showing the absence of marked stricture.

His incontinence of urine is, then, due to *tabes*, and to that alone. As his urine is purulent and ammoniacal, we will cystoscope him to be sure that he has no calculus concealed in his bladder, for the bladder of the tabetic is so insensitive that it may harbor a stone without the pain usually caused by a calculus. Through the cystoscope you see a bladder beautifully trabeculated, with a beginning diverticulum back of the trigonum; this is the usual picture in a tabetic bladder. There is a general redness of the bladder, with dilated arteries—pus infection or cystitis; but the ureter orifices are normal, showing the absence of serious trouble in the ureters. On inquiry we learn that he contracted syphilis seven years ago—the usual but not invariable antecedent of *tabes*. It is noteworthy that *tabes* appears in the syphilitic, if at all, between three and ten

years after syphilis was acquired—rarely earlier than three, seldom later than ten years.

*Treatment.*—This patient has been treated by several physicians for “cystitis;” his bladder has been washed out, and, of course, he has been urged to submit to prostatectomy. This dangerous cure for all urinary troubles is fortunately becoming less frequent than it was a few years ago. Prostatectomy is a valuable measure when needed, but it has done great harm in the past.

For this patient we shall prescribe three remedies: (1) urotropin, a  $7\frac{1}{2}$ -grain tablet with glass of water after each meal; (2) strychnin nitrate, 1/15 grain, and atropin sulphate, 1/150 grain, for hypodermic injection once daily; (3) in the near future, when the strychnin is stopped, mercury bichlorid, 1/16 grain, by intramuscular injection once a day for two weeks.

The urotropin will arrest the pus infection of the urinary tract; the strychnin and atropin will, at least temporarily, improve the innervation of the bladder muscles; the mercury may or may not combat the morbid process in the spinal cord.

(This patient reported a week later that his incontinence had ceased and showed dry clothing.)

CASE 2.—*Retention of Urine.* Man, 67 years old, bladder distended above symphysis. Attempts to catheterize with metal catheters have drawn blood, but no urine.

Retention of urine is usually due either to a tight stricture or prostatic disease. Tight strictures are not common, but prostatic disease is very common in elderly men. The finger in the rectum detects a large, asymmetrical, hard prostate—causing a strong suspicion of prostatic carcinoma (subsequently verified).

The false passages previously made are the only serious obstacle to catheterism. We will first try to enter the bladder with a soft catheter; this passes to the prostate, but no further.

Now let us remember that we have a prostatic urethra of unnatural curvature; hence we must not expect to pass a metal catheter which is made for the natural curve. This is the mistake commonly made—the effort to pass a rigid instrument made for the normal urethra through an abnormal curve. The result is usually, as in this case, false passages, bleeding, but no urine.

We will take the flexible instrument devised by Mercier half a century ago for just these cases; the condé or prostatic catheter,

with tip turned up like a sled-runner. We introduce this gently—its turned-up tip dodges the false passages (in the floor of the urethra) and enters the prostatic portion. Here there is a slight resistance, but gentle pressure causes the tip to enter the bladder, giving vent to a quart of foul urine tinged with blood. The bladder is washed with warm water, followed by silver nitrate solution, 1 grain in a pint of water (1/8000). Urotropin is prescribed, and the patient warned against constipation.

Suppose we had been unable, because of the false passages, to reach the bladder by any catheter, how should we have relieved the retention? By just one method: with a small trocar and canula we would puncture the bladder an inch above the symphysis; withdrawing the trocar, we would pass through the canula a small soft rubber catheter to the base of the bladder; then withdrawing the canula, the catheter would be left in position to drain and wash the bladder (and held in place by a safety-pin and adhesive strip). This would be left in place three or four days, while the false passages in the urethra were healing; then a catheter could be passed through the urethra and tied in, after which the supra-pubic catheter would be withdrawn and the puncture would heal without further attention.

This method is obviously vastly better than repeated aspirations or punctures.

CASE 3.—*Sterility*. This robust man, 35 years old, married a healthy young woman four years ago. Though copulation is normally performed, conception has not occurred. The wife has been pronounced normal; the husband appears for examination.

He denies syphilis, and, as he was circumcised in infancy, we readily believe him. (Jews and Mohammedans seldom acquire syphilis, being protected by circumcision from the abrasions in copulation so common among Gentiles.)

He admits two gonorrheal infections, eight and ten years ago respectively. Is his wife's sterility a result of "latent gonorrhea" acquired from the husband? No; that is a delusion dating back to Noeggerath, who promulgated this doctrine years before the gonococcus was discovered.

We find that the epididymis and the vas deferens on each side are distinctly thickened; that means a chronic infection and obliteration of these canals. From what? From strictures, probably. We

examine with the acorn bougie, and find a stricture of the bulbous urethra which arrests a 19 French bougie.

The sequence of events is plain—gonorrhea, stricture, chronic pus infection (beginning years after the gonorrhea was cured) spreading through the prostatic urethra, the ejaculatory ducts, the vasa deferentia, the epididymes and causing obliteration of these minute canals. Examination of the semen in similar private patients has shown a total absence of spermatozoa; we have had no chance to examine this man's semen, but the obliteration of the epididymes is practically certain.

Treatment will probably be unsuccessful; the only hope is that the thickened part of the epididymis may be excised and the vas anastomosed with the patent epididymis above. The chance of success is not great. (This was explained to the patient, who concluded to "think it over.")

The poor wife, in these cases, is usually curetted and treated in various ways, until some one happens to remember that spermatozoa are necessary to fertilize a woman, and advises that the husband's semen be examined. The "latent gonorrhea" fad has been worked overtime for many years.

CASE 4.—*Gonorrheal Vesiculitis*. This young man has an ordinary case of gonorrheal infection of the prostate and left seminal vesicle. He has been treated in this clinic by massage, deep instillations, etc., but still has a slight discharge and frequent desire to urinate.

We will, therefore, inject a 3 per cent. argyrol solution directly into the infected seminal vesicle. This is easily done by making a half-inch incision through the scrotum, picking up the vas deferens, opening it, and inserting the needle of a hypodermic syringe into its minute canal. The solution injected into the vas passes along this tube into the vesicle. We can then milk it out of the vesicle by the finger in the rectum and inject more through the vas.

When necessary I stitch the vas into the scrotal incision and inject the vesicle every day for a week.

The chronic infections of the seminal vesicle and vas are frequent, but are not usually identified, for the symptoms caused are generally referred to the bladder or prostate and treated as cystitis and prostatitis. The method that I have devised for direct medication of the vesicle by injections through the vas makes these



common ailments amenable to treatment without danger to the patient or to his sexual function. The little operation is done in the office under cocain anesthesia, the patient losing no time from his vocation.

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*Errata.*—Cook County Internes. I. S. Koltinsky in the list of internes published in the last issue of THE BULLETIN was accredited to Northwestern. He is a senior at Rush and graduates this quarter.

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## PROGRAM FOR COMMENCEMENT WEEK.

### SUNDAY, JUNE 9, 1907.

2:30 p. m.—Baccalaureate Address, Rev. William A. Quayle, Upper Amphitheater, Rush Medical College.

### MONDAY, JUNE 10.

9:00 to 11:00.—Medical clinic, Prof. Frank Billings, Upper Amphitheater.

11:00 to 1:00.—Surgical clinic, Prof. Arthur Dean Bevan, 101 Senn Hall.

2:00 to 3:00.—Dermatological clinic, Prof. James Nevins Hyde, South Amphitheater, Senn Hall.

3:00 to 4:00.—Class day exercises, Upper Amphitheater.

Address, Prof. Nicholas Senn.

Receiving of Class Tablet, Prof. James Nevins Hyde.

4:00 to 6:00.—Genito-urinary clinic, Prof. William T. Belfield, 101 Senn Hall.

8:00 p. m.—Theater party of the graduating class and alumni. "A Knight for a Day." The Whitney Opera House, 17 East Van Buren street.

### TUESDAY, JUNE 11.

9:00 to 11:00.—Medical clinic, Prof. James B. Herrick, Cook County Hospital.

9:00 to 11:00.—Pediatric clinic, Prof. John M. Dodson, South Amphitheater, Senn Hall.

11:00 to 1:00.—Surgical clinic, Prof. John B. Murphy, Upper Amphitheater.

2:00 to 4:00.—Demonstration of pathological specimens, Prof. E. R. Le Count, Room 400 Senn Hall.

6:00 P. M.—Annual business meeting and dinner of the Alumni Association, De Joghne's Restaurant, 45 Monroe street.

Paper, Dr. Rosenow, former Alumni Fellow.

Reports of Committees.

Quartette of Class '02 will sing.

Reunions of the Classes of '52, '57, '62, '67, '72, '77, '82, '87, '92, '97 and '02.

#### WEDNESDAY, JUNE 12.

9:00 to 11:00.—Medical clinic, Prof. Bertram W. Sippy, Upper Amphitheater.

11:00 to 1:00.—Gynecological clinic, Prof. J. Clarence Webster, North Amphitheater, Senn Hall.

11:00 to 1:00.—Neurological clinic, Prof. Daniel R. Brower.

3:00 P. M.—Graduating exercises, Mandel Hall, University of Chicago.

Address, Llewellys F. Barker of Johns Hopkins University.

6:00 P. M.—Annual reception and banquet of the faculty and alumni to the graduating class, Hutchinson Hall, University of Chicago.

Sons of "Old Rush" will celebrate in song and story.

#### THURSDAY, JUNE 13 TO SATURDAY, JUNE 20.

Special courses for the alumni continue as per special announcement.

A continuous exhibit of gross pathological specimens has been arranged by Professors Hektoen and Le Count on the fourth floor of Senn Hall.

## REVISION OF THE CONSTITUTION.

The constitution needs revising. The executive committee herewith submits a copy of the proposed revision and a copy of the old constitution. This will be voted on at the annual meeting June 11, 1907, De Joghne's restaurant.

## PROPOSED REVISION OF THE CONSTITUTION OF THE ASSOCIATION.

ARTICLE I. This Society shall be known as the Alumni Association of Rush Medical College.

ARTICLE II. The object of the Association shall be to assemble at stated intervals for mutual counsel and social intercourse, to revive and continue pleasant memories, exchange new pledges of brotherhood and friendship, and to advance in every possible way the interests of higher medical education and of Rush Medical College.

ARTICLE III. The membership shall consist of those who have received a degree from Rush Medical College, providing they are in good standing in the profession, and shall subscribe to these articles and pay the annual dues. The Faculty of the college shall be honorary members of the Association.

ARTICLE IV. The officers shall be elected annually and serve one year, or until their successors are elected, and shall consist of a president, two vice-presidents, a secretary and a treasurer, who shall perform the duties usually assigned to such officers; also an executive committee of three members, who shall have charge and direction of the affairs of the Association, arrange the program of meetings, see that the journal of proceedings is duly published and copies sent to the members, make provisions for the nomination and election of officers for the succeeding year, and provide at least one Literary and Social Festival in each year.

ARTICLE V. The annual dues of each member shall be one dollar.

ARTICLE VI. The regular annual meeting of the Association shall be held in Chicago during the week of the spring quarter commencement of the college, a day and place to be selected by the executive committee.

ARTICLE VII. Any member of the Association guilty of a violation of the Principles of Medical Ethics of the A. M. A. may be expelled by a two-thirds vote of the members present at a regular meeting, due notice of the proposed action having been given to the members previous to the meeting.

ARTICLE VIII. These articles may be altered or amended at any regular meeting of the Association by a two-thirds vote of the members present, notice of the proposed amendment having been mailed to each member at least one week in advance of the meeting.

## CONSTITUTION OF THE ASSOCIATION.

ARTICLE I. This Society shall be known as the Alumni Association of Rush Medical College.

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ARTICLE III. The membership shall consist of graduates and those who have received the ad eundem or honorary degrees in Rush Medical College, providing they are in good standing in the profession, and shall subscribe to these articles and pay the annual dues. The Faculty of the college shall be honorary members of the Association.

ARTICLE IV. The officers shall be elected annually and serve one year, or until their successors are elected, and shall consist of a president, two vice-presidents, a secretary and a treasurer, who shall perform the duties usually assigned to such officers; also an executive committee of three members, who shall have charge and direction of the affairs of the Association, arrange the program of meetings, see that the journal of proceedings is duly published and copies sent to the members, nominate officers for the succeeding year, and provide at least one Literary and Social Festival in each year.

ARTICLE V. The funds of the Association shall consist of the annual dues of one dollar from each member. (The by-laws provide that these funds shall be expended only for printing reports and other incidental expenses of the Association, and that no part of them shall be used to defray the expenses of the annual banquet, which is given by the Faculty.)

ARTICLE VI. The regular annual meeting of the Association shall be held in Chicago on "Commencement Day" of Rush Medical College.

ARTICLE VII. Any member of the Association guilty of a violation of the Principles of Medical Ethics of the American Medical Association may be expelled by a two-thirds vote of the members present at a regular meeting, due notice of the proposed action having been given to the members previous to the meeting.

ARTICLE VIII. These articles may be altered or amended at any regular meeting of the Association by a two-thirds vote of the members present. Amendment passed Feb. 20, 1882.

*Resolved*, That any money in the hands of the treasurer may, by a vote of the Association, be devoted to charitable purposes if thought expedient.

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## ABSTRACTS OF LETTERS FROM THE ALUMNI.

### SHORT BIOGRAPHICAL SKETCHES.

'74. **Archibald Robertson Small**, Chicago, Ill., entered Rush in 1874. He practiced since graduation at Little York, Ill., 1874 to 1876, Decatur 1876 to 1885, and since then at his present location. He took two years at Monmouth College in preparation and spent one year in the medical department in the University of Michigan. He does a general practice, but makes a specialty of gynecology. He is a member of the following medical societies: Chicago, Illinois State, Physicians' Club and the A. M. A. He has written numerous articles, principally on surgical subjects. He is a Mason. He is married and has one son, a lawyer. A nephew of his, Edward S. Winbigler, is a graduate of Rush in the class of 1893.

'76. **Edward Willison Minton**, Oakdale, Neb., entered Rush in 1874. He



was prepared at Blackburn University, Carlinville, Ill. Degree of A.B. He is still in active practice, and makes a specialty of eye and refraction. Before coming to his present location he practiced in Hoopston eight months and Wellington, Ill., eight years. He was president of the Elkhorn Valley Medical Society in 1898. He was a member of the U. S. Pension Board Examining Surgeons five years at Neligh, Neb. He was coroner of Antelope County for two terms on the Prohibition ticket. He belongs to the following medical societies: Antelope County, Elkhorn Valley (president, 1898), Nebraska State and the A. M. A. He is a member of the Oakdale Commercial Club, and is a ruling elder in the Presbyterian Church. He is married and has had five children, four of whom are living. A brother-in-law, Dr. Childs Mantor, of Salt Lake City, Utah, was a graduate of Rush in the class of 1875.

'76. **Brodie Watson Parks**, Bourbon, Ind., entered Rush in 1875. He has retired from active practice. He has traveled extensively in this country. He is married and has six children. John P. Parks, a cousin, was a graduate of Rush in 1875, and lives in Bourbon, Ind. C. M. Parks, a brother, also attended Rush, and T. T. Linn, 1864, a cousin, was a graduate.

'76. **Willis F. Pierce**, Carson, Iowa, entered Rush in 1874. He is still in active practice. He was prepared at the Dover Academy, Dover, Ill., and the Princeton High School, Princeton, Ill. He has practiced since graduation at the following places: Malden, Ill., 1876 to 1877, and New Bedford, Ill., 1878 to 1879. He has been city and township health officer for several years. He has been local surgeon for the C., R. I. & P. and C., B. & Q. Railway companies. He is a member of the following medical societies: Pottawattamie County (formerly president), Batna Valley, Missouri Valley, Mississippi Valley, Iowa State Railway Surgeons, American Association of Railway Surgeons, Rock Island System Surgical Association and the A. M. A. He has traveled through parts of Asia, Africa, Europe and New Mexico. He has been several times a delegate to the State Republican convention. He is a member of the Congregational Church. He is married, but has no children.

'76. **Eugene Smith**, Lawrence, Kan., entered Rush in 1875. He had taken one year at the medical department of the University of Michigan. He received his preparatory training at Monmouth College. He does a general practice. He has practiced at Viola, Ill., 1876 to 1881, and Burchard, Neb., 1881 to 1898. He did postgraduate work at Rush in 1881. He is a demonstrator of anatomy in the University of Kansas. He belongs to the following medical societies: Douglas County, Kansas State and the A. M. A. He is a member of the United Presbyterian Church. He is married and has had six children, five of whom are living.

'76. **Lucas R. Williams**, Chicago, Ill. He came to Rush as a graduate of the Bennett Medical College. He was prepared for medicine at the high school. He practiced in New York before coming to Chicago.

'77. **Clark Wesley Voorus**, Beaver Dam, Wis., entered Rush, ——. He is doing a general practice. He has done postgraduate work at Rush and

others clinics since 1885, every three or four years from two to four weeks at a time. He has practiced at Lowell seven years, Oakfield one year and Oak Grove one year. He is a member of the following medical societies: Dodge County, Wisconsin State and the A. M. A. He was superintendent of city schools from 1895 to 1897. He is married and has two children, a son and a daughter. A brother-in-law, Frank S. Reynolds, was a member of the class of 1876.

'77. **William Treacy**, Helena, Mont., entered Rush in 1875. He is doing a general practice. He has practiced at the following places since graduation: Chicago, 1877 to 1879; Monticello, Ind., 1879 to 1882, and Montana since. He has the distinction of having been operated on by Prof. Moses Gunn, of revered memory. He has done postgraduate work at the Chicago Polyclinic three times; also postgraduate Chicago, 1886, Mount Sinai Hospital of New York, 1886, and New York Polyclinic, 1896. He was president of the Montana State Medical Society in 1896. He was U. S. pension examiner 1884 to 1886. He was president of the State Board of Health 1900 to 1906, president of the Meat and Milk Inspector Board 1900 to 1906. He has been surgeon of the Northern Pacific Railway from 1884 to date. He has been surgeon St. John's Hospital since 1888. He was U. S. surgeon at Ft. Harrison during Spanish-American War, eighteen months service. He is a member of the Montana State Medical Society and the A. M. A. He is a member of the Montana Club at Helena. He is married and has three children, all of whom are living.

'77. **Albert B. Royal**, Pasadena, Cal., entered Rush in 1873. He was prepared at the Classical Academy, Morris, Ill. He is still in active practice and has practiced one year at Mazon, Ill., and at Americus, Kan., from 1878 to 1893. He is a member of the Los Angeles County and the Pasadena Medical Societies. He was a member for two years of the City Council in Americus, Kan., also a member of the school board for several years. At present he is a trustee of the M. E. Church in North Pasadena, Cal. He is married and has one child.

'77. **James H. Plecker**, Chicago, Ill., entered Rush in 1875. He was prepared at Hedding College at Abingdon, Ill. He is still in active general practice. He was medical director of the Department of Illinois G. A. R., 1903. He belongs to the Chicago Medical Society and the A. M. A. He is a Mason and a G. A. R. He is married and has one child, a daughter.

'77. **John Randolph McCluggage**, Douglas, Kan., entered Rush in 1875. He was prepared at the Havana, Ill., high school and Eureka College. He is still in active general practice. He was president of the South Kansas Medical Society and also of the Butler County Society, Kansas. He belongs to the following medical societies: South Kansas, Butler County, Kansas State and the A. M. A. He was at one time a member of the Illinois State Medical Society. He practiced in Manito, Ill., from 1877 to 1883. He belongs to numerous lodges and clubs, also to the Methodist Church. He is married and has four sons.

'77. **John Wesley La Grange**, Marion, Iowa, entered Rush in 1876. He is still in active general practice. He was prepared at the high school,

Vinton, Iowa, the academy at Hopewell, Ind., and attended Hanover College, 1872, 1873, 1874. He practiced for a short time at Vinton, Iowa. He has done postgraduate work during the fall and winter of 1890 at the Polyclinic, New York City. He is a member of the U. S. Pension Examining Surgeons Board at Cedar Rapids, Iowa. He has been on the board since its formation in 1881, with the exception of the two Cleveland administrations. He is a member of the Linn County, Iowa, Union and the Iowa State Medical Societies and the A. M. A. He traces his ancestry back to France, 1630. From his mother's side he traces his ancestry to the Mayflower, and was, "of course," as he says, "a Presbyterian," until he married his second wife; then he became a Methodist on her account. He is married and has had five children, three of whom are living. A brother, Robert La Grange, deceased, was a member of the class of 1871; another brother, Orion D. La Grange, also deceased, attended Rush Medical College.

'77. **Edwin J. Lewis**, Sauk Center, Minn., entered Rush in 1875. He does a general practice, but is doing some special work on the eye. He has practiced at Ironton, Wis., from 1877 to 1883. He belongs to the following medical societies: Stearns-Benton County, Minnesota State and the A. M. A. He is married and has three children. A brother-in-law, Edwin P. Kermott, 1886, and a son, Claude B. Lewis, 1903, have both been at Rush.

'77. **Newell Hiram Hamilton**, Santa Monica, Cal., entered Rush in 1876. He took one year in medicine at the University of Michigan. He was prepared at the high school of Winona, Minn. He is still in active practice, and has practiced since graduation at Minneiska, Minn., 1877 to 1879, Grafton, N. Dak., 1879 to 1893. He was a member of the County Board of Insanity Examiners 1884 to 1889, Walsh County, N. Dak.; also secretary and superintendent of the Board of Health of same county 1884 to 1893. He was a member of the U. S. Pension Examining Surgeons 1879 to 1893. He was county physician for Walsh County, N. Dak., 1880 to 1893, and county coroner from 1880 to 1884. He was first vice-president of North Dakota State Medical Society 1890 to 1891. He has done postgraduate work in Chicago in 1893 and in Johns Hopkins in 1903. He is a member of the following medical societies: Los Angeles County, California State and the A. M. A. He is a member of the Presbyterian Church,, a Mason (Blue Lodge, Chapter and Commandery), and a member of the Knights of Pythias. He is married and has had four daughters, three of whom are living.

'77. **Charles Addison Hayes**, Chippewa, Wis., entered Rush in 1875. He is a graduate of the Northwestern State Normal, Farmington, Maine, in 1870. He is still in active general practice. From 1877 to 1882 he was assistant superintendent of the Hospital for Insane at Osawatomie, Kan. He did postgraduate work at the Polyclinic in New York in 1883. He was president of the County Medical Society for three years. He has been health officer and county physician. He is a member of the following medical societies: Chippewa Falls County, Wisconsin State and the A. M. A. He is a Mason, with the Templar degree. He is a Republican and a Congregationalist. He is married and has two children.

'77. **Dexter Boyleston Farnsworth**, Springfield, Mo., entered Rush in

1875. He was prepared at the Northwestern University. He is still in active practice and makes a specialty of the eye, ear, nose and throat. He has done postgraduate work as follows: Rush Medical College, 1888; Chicago Ophthalmic College and Illinois Eye and Ear Infirmary, 1888, and the New York Polyclinic, 1900. He belongs to the Green County, the Southwest Missouri, Missouri State Medical Societies and the A. M. A. He is married.

'77. **William R. Freek**, Cordova, Ill., entered Rush in 1875. He does a general practice. He is a member of the Rock Island County Medical Society, and was its president in 1903. He is a Mason and a Knight of Pythias. He is a Republican in politics. He is married and has two children.

'77. **F. W. Epley**, New Richmond, Wis., entered Rush in 1875. He does a general practice. During 1895 to 1896 he was president of the Wisconsin State Medical Society. In 1887 he was elected honorary member of the Minnesota State Medical Society; also an honorary member of the Fox River Valley Medical Society and the Interurban Medical Society of Duluth and Superior, 1895. He was the first president of the Inter-County Medical Society. He is a member of the following medical societies: St. Croix County, Western Wisconsin, Wisconsin State, National Railway Surgeons and the A. M. A. He was alderman of the city of New Richmond from 1892 to 1893, and then served as mayor from 1902 to 1904. He believes in municipal ownership and built the first plant for long distance electrical transmission of water power in the Northwest for New Richmond. He is a Congregationalist and a Mason; also a Rossevelt Republican. He is married and has five children. One son, Otis Hoyt Epley, is a graduate of Rush 1904.

'78. **Eugene Walcott Whitney**, Salt Lake, Utah, entered Rush in 1875. He was prepared at the Chicago high schools and is a graduate of Yale College with the degree of A.B. He was chief of the clinical staff under Professor Gunn and later under Professor Parkes. He was demonstrator of operative surgery upon the cadaver from about 1882 to 1889, and gave the first regular courses of this nature ever given to students in small classes. He practiced in Chicago for several years after his graduation. He was interne in Cook County Hospital, attending surgeon Cook County Hospital and the Presbyterian Hospital. He was genitourinary surgeon at St. Joseph's Hospital. He spent two and a half years at postgraduate work in Vienna. He was formerly a teacher of surgery at Rush, and introduced antiseptic surgery (listerine) in Rush in 1884. His appointments at Rush were as follows: Assistant demonstrator of anatomy 1878-1883, lecturer on surgical dressings and demonstrator of surgery 1883-1884, lecturer on surgery 1884-1888, lecturer on surgery and demonstrator of anatomy 1888-1889. He went to Salt Lake City on account of his health and has since done a general practice. He is now attending physician at Holy Cross Hospital, Salt Lake City, and is county physician of Salt Lake County. He is a member of the Salt Lake County and Utah State Medical Societies and the A. M. A. He is a member of the University Club of Salt Lake City. He is married, but has no children.



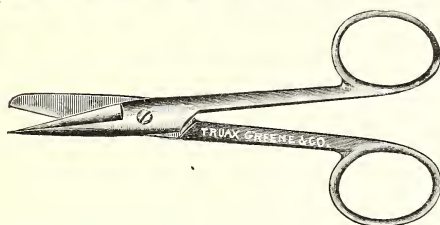
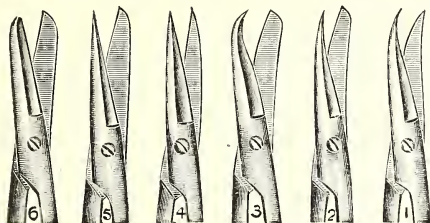
'78. **Isaac Newton Wear**, Fargo, N. Dak., entered Rush in 1876. He is not in active practice just at present on account of ill health. He practiced for four years at Fandon, Ill., before going to his present location. He did postgraduate work in 1881 at ————. He was surgeon for eleven years to Cass County, N. Dak., Hospital. He was for twelve years on the State Board of Medical Examiners. He has been president of the North Dakota State Medical Society, and in 1903 he was a delegate to the International Medical Congress at Madrid. He is a member of the following medical societies: Cass County, North Dakota State, the A. M. A., and the International Medical Congress. He has traveled extensively, both in this country and in Europe. When this letter was written he was living in Florence, Italy. He is married, but has no children. •

'78. **William Lloyd Smith**, Streater, Ill., entered Rush in 1875. He is doing a general practice. He was prepared at the Shippensburg Normal. He has done postgraduate work every two years since 1885 at the Johns Hopkins Hospital. He was for twenty-one years a surgeon of the Illinois National Guard. He was examining surgeon during the Spanish-American War. He is a member of the La Salle County, Illinois State, Military Surgeons, National Railway Surgeons Medical Societies and the A. M. A. He is married, but has no children.

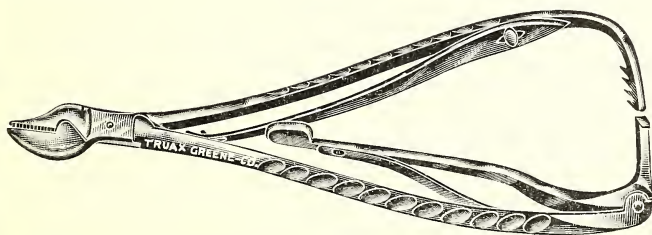
'78. **Jerome H. Salisbury**, Chicago, Ill., entered Rush in 1876. He was prepared at the University of Wisconsin and was graduated in 1874 with the degree of A.D. He does a general practice, but gives special attention to the disorders of digestion. He studied in Europe during the summer of 1903. He was professor of chemistry in the Woman's Medical College. He is assistant professor of chemistry at Rush Medical College and professor of medicine at the Chicago Clinical School. He has the degree of A.M. from Lake Forest University. He is a member of the following medical societies: Chicago, Illinois State and the A. M. A. He has written numerous articles on subjects relating to physiological chemistry. He has been associated with Dr. Billings in the publication of the volumes on Practical Medicine in the Year Book Series. He is married and has two children. A relative, Francis Salisbury, 1884, Sparta, Wis., has been at Rush.

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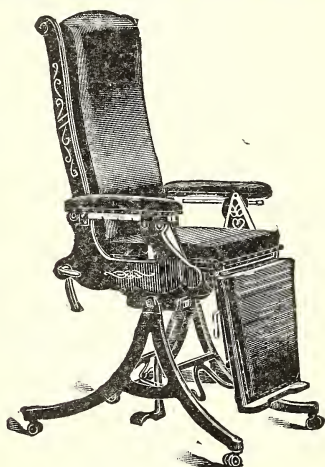
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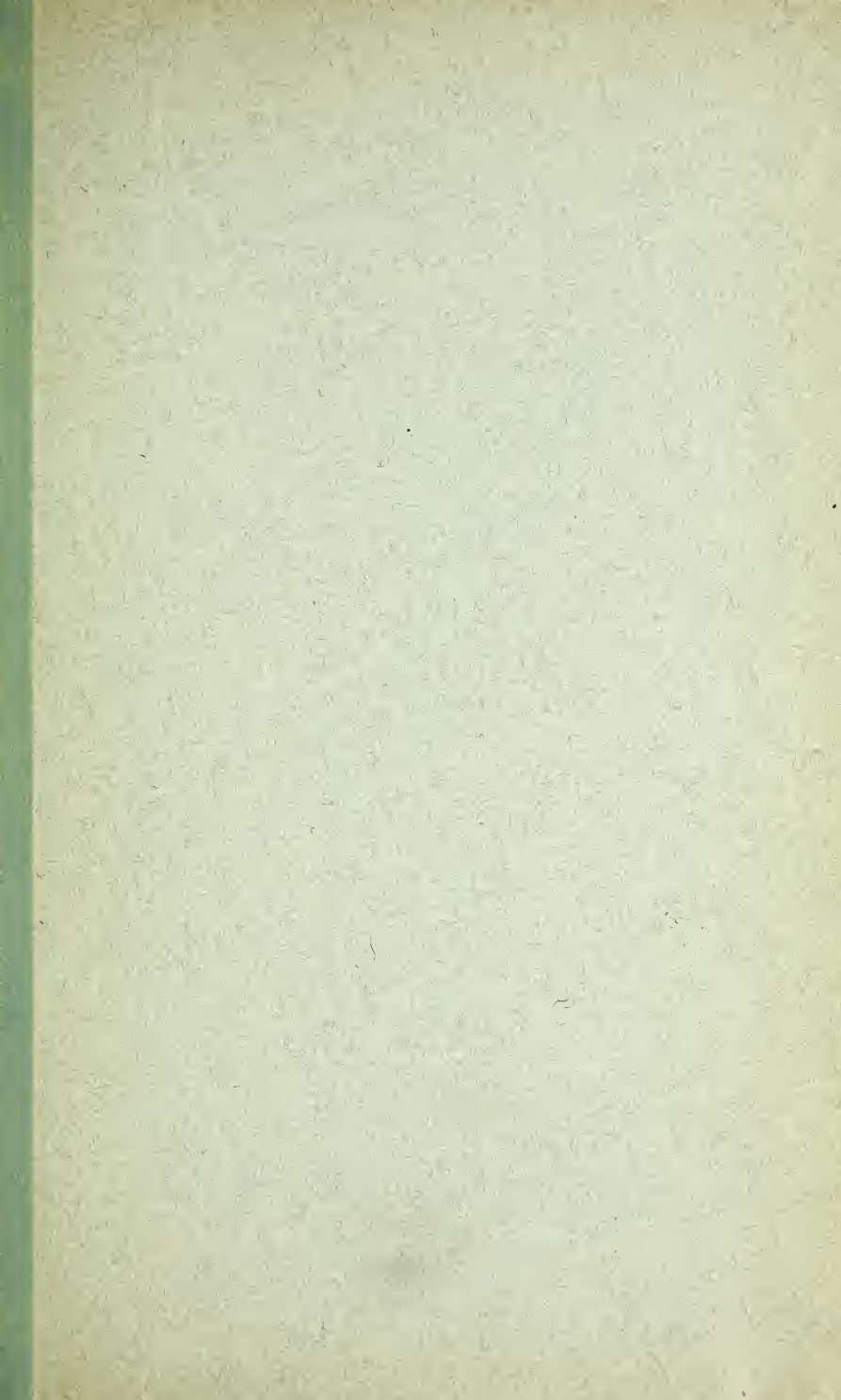
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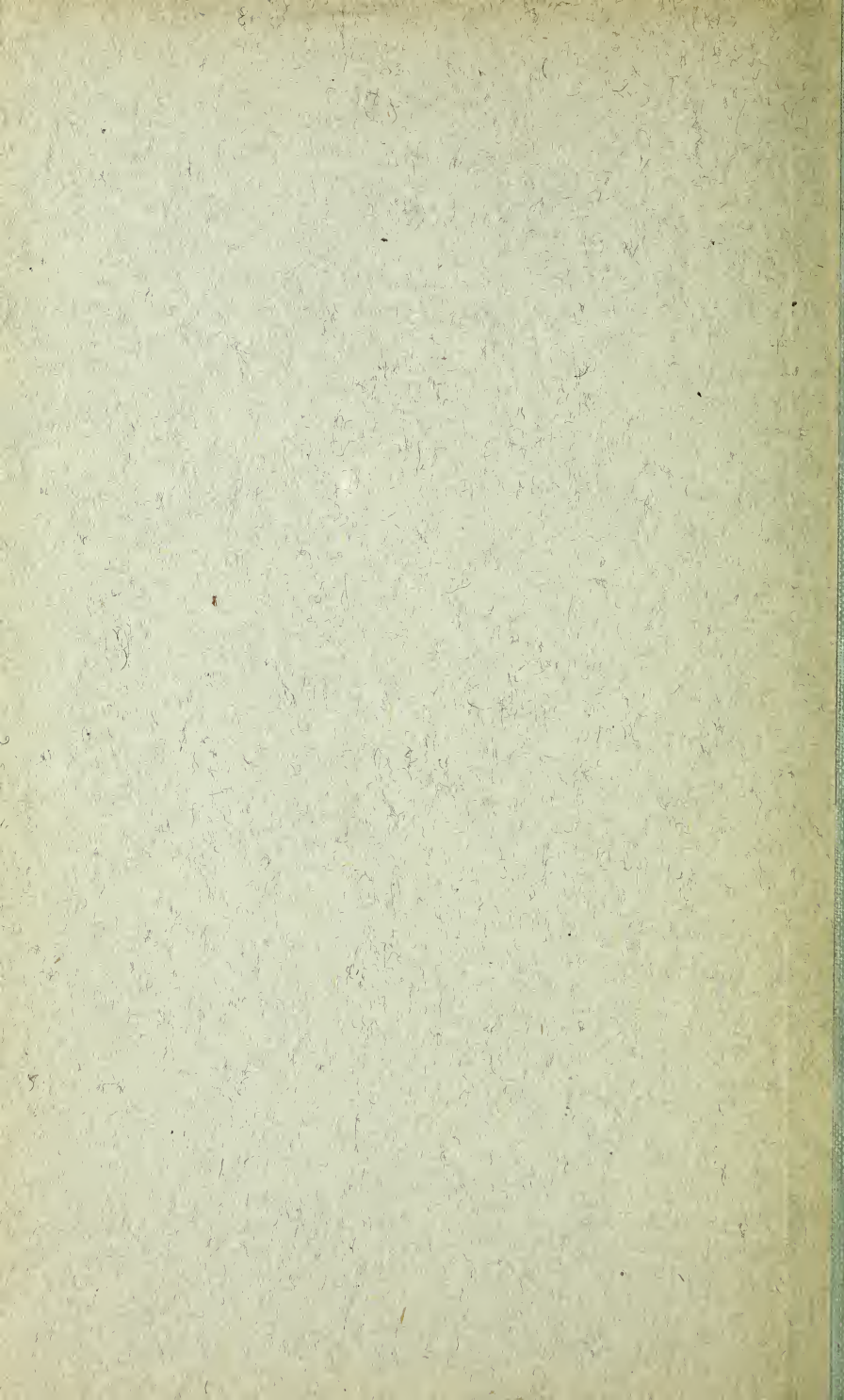
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